

Facility Information			
ID / Dist	Name / Location Address ...	County	Regulated Activity
NJD096873724	FORMER THOMAS & BETTS ELIZABETH SITE		
CENTRAL	36 BUTLER STREET		CG
	ELIZABETH NJ 07206	UNION	-----

Current Federal Activities

Hazardous Waste Conditionally-Exempt Very Small Generator

Other State Interests

-State Not a generator, Verified

Sources Overwritten Prior to 2001 (before RCRA kept history for activity/address/contact)

01/01/07 I State/EPA  
01/01/06 I State/EPA  
04/02/04 R 03 Biennial  
09/26/96 R 95 Biennial  
02/22/94 R 93 Biennial  
02/28/92 R 91 Biennial  
04/12/90 R 89 Biennial  
08/13/80 N Notification

Extract Flag

All data for this Handler is released to the Public (except any enforcement-sensitive CME data)

Activity Location

Handler Module Data for NJ State only

Previous/Other Site Name

09/26/96 95 Biennial THOMAS & BETTS  
02/22/94 93 Biennial THOMAS & BETTS CORP  
02/28/92 91 Biennial THOMAS & BETTS CO. THE  
04/12/90 89 Biennial THOMAS & BETTS COMPANY  
08/13/80 Notification THOMAS & BETTS CO THE

Location Address

01/01/07 State/EPA 36 BUTLER STREET (NJ039)  
UNION  
ELIZABETH, NJ 07206  
State District: CENTRAL  
Land Type: Private (P)  
01/01/06 State/EPA 36 BUTLER STREET (NJ039)  
UNION  
ELIZABETH, NJ 07206  
State District: -  
Land Type: Private (P)  
09/26/96 95 Biennial 36 BUTLER ST (NJ039)  
UNION  
ELIZABETH, NJ 072070000  
State District: CENTRAL  
Land Type: ()

RCRAREp Handler Detail Report

Report run on: October 10, 2014 10:45 AM

NJD096873724

Location Address

02/28/92 91 Biennial	36 BUTLER ST. UNION (NJ039) ELIZABETH, NJ 072060000 State District: CENTRAL Land Type: ()
04/12/90 89 Biennial	36 BUTLER STREET UNION (NJ039) ELIZABETH, NJ 07207 State District: CENTRAL Land Type: ()
08/13/80 Notification	36 BUTLER ST UNION (NJ039) ELIZABETH, NJ 07207 State District: CENTRAL Land Type: ()

North American Industrial Classification (NAICS)

01/01/07 State/EPA	32311	33231	332813	335932	514199	54138	56172	56211
01/01/06 State/EPA	332212	335931	335932					
04/02/04 03 Biennial	335932							
09/26/96 95 Biennial	335932							
02/22/94 93 Biennial	3323	562						
02/28/92 91 Biennial	32311	3323	332813	335932	514199	54138	56172	562
04/12/90 89 Biennial	335932							

32311	PRINTING
332212	HAND AND EDGE TOOL MANUFACTURING
3323	ARCHITECTURAL AND STRUCTURAL METALS MANUFACTURING
33231	PLATE WORK AND FABRICATED STRUCTURAL PRODUCT MANUFACTURING
332813	ELECTROPLATING, PLATING, POLISHING, ANODIZING, AND COLORING
335931	CURRENT-CARRYING WIRING DEVICE MANUFACTURING
335932	NONCURRENT-CARRYING WIRING DEVICE MANUFACTURING
514199	ALL OTHER INFORMATION SERVICES
54138	TESTING LABORATORIES
56172	JANITORIAL SERVICES
562	WASTE MANAGEMENT AND REMEDIATION SERVICES
56211	WASTE COLLECTION

Mailing Address

01/01/07 State/EPA	8155 T&B BLVD. MEMPHIS, TN 38125
09/26/96 95 Biennial	5601 EAST HIGHLAND DR JONESBORO, AR 724010000
02/22/94 93 Biennial	36 BUTLER ST ELIZABETH, NJ 072070000
02/28/92 91 Biennial	36 BUTLER STREET ELIZABETH, NJ 072060000

RCRAREp Handler Detail Report

Report run on: October 10, 2014 10:45 AM

NJD096873724

Mailing Address

04/12/90 89 Biennial 36 BUTLER STREET  
ELIZABETH, NJ 07207  
08/13/80 Notification 36 BUTLER ST  
ELIZABETH, NJ 07207

Contact

01/01/07 State/EPA OM P CHOPRA  
8155 T&B BLVD.  
MEMPHIS, TN 38125  
Phone: (901)252-5937  
eMail: OM\_CHOPRA@TNB.COM  
09/26/96 95 Biennial ARTHUR E MALANGA  
Phone: (501)935-2559 236  
04/12/90 89 Biennial JOHN FUSCO  
Phone: (201)351-8800 200  
08/13/80 Notification ALFRED ROTTMANN  
36 BUTLER ST  
ELIZABETH, NJ 07207  
Phone: (908)351-8800

Legal Owner/Operator of Site

01/01/07 State/EPA Current Owner from -  
THE THOMAS & BETTS CORP (Private)  
NOT REQUIRED  
NOT REQUIRED, WY 99999  
Phone: (212)555-1212  
Notes: This record created to coincide with EPA Mass Update for 01/  
01/2007 on Rundate: 06/11/2008  
01/01/07 State/EPA Current Operator from 12/20/1999 -  
NO NAME FOUND (Private)  
Notes: This record created to coincide with EPA Mass Update for 01/  
01/2007 on Rundate: 06/11/2008  
04/02/04 03 Biennial Current Operator from 12/20/1999 -  
ELIZABETH INDUSTRIAL CENTER, L.L.C. (Private)  
08/13/80 Notification Current Owner from -  
THE THOMAS & BETTS CORP (Private)  
NOT REQUIRED  
NOT REQUIRED, WY 99999  
Phone: (212)555-1212

Regulated Hazardous Waste Activities

01/01/07 State/EPA  
Federal Conditionally Exempt SQG  
State Not a generator, Verified

RCRARep Handler Detail Report

Report run on: October 10, 2014 10:45 AM

NJD096873724

Regulated Hazardous Waste Activities

01/01/06 State/EPA  
Federal Small Quantity Generator  
State Not a generator, Verified  
04/02/04 03 Biennial  
Federal Not a Generator  
09/26/96 95 Biennial  
Federal Large Quantity Generator  
02/22/94 93 Biennial  
Federal Large Quantity Generator  
02/28/92 91 Biennial  
Federal Large Quantity Generator  
04/12/90 89 Biennial  
Federal Large Quantity Generator  
08/13/80 Notification  
Federal Large Quantity Generator

Waste Codes

04/02/04 03 Biennial	D040							
08/13/80 Notification	F001	F002	F006	F007	F008	F009	P030	P106
	P121	U154	U228					

D040 TRICHLOROETHYLENE

F001 THE FOLLOWING SPENT HALOGENATED SOLVENTS USED IN DEGREASING: TETRACHLOROETHYLENE, TRICHLOROETHYLENE, METHYLENE CHLORIDE, 1,1,1-TRICHLOROETHANE, CARBON TETRACHLORIDE AND CHLORINATED FLUOROCARBONS; ALL SPENT SOLVENT MIXTURES/BLENDS USED IN DEGREASING CONTAINING, BEFORE USE, A TOTAL OF TEN PERCENT OR MORE (BY VOLUME) OF ONE OR MORE OF THE ABOVE HALOGENATED SOLVENTS OR THOSE SOLVENTS LISTED IN F002, F004, AND F005; AND STILL BOTTOMS FROM THE RECOVERY OF THESE SPENT SOLVENTS AND SPENT SOLVENT MIXTURES.

F002 THE FOLLOWING SPENT HALOGENATED SOLVENTS: TETRACHLOROETHYLENE, METHYLENE CHLORIDE, TRICHLOROETHYLENE, 1,1,1-TRICHLOROETHANE, CHLOROBENZENE, 1,1,2-TRICHLORO-1,2,2-TRIFLUOROETHANE, ORTHO-DICHLOROBENZENE, TRICHLOROFLUOROMETHANE, AND 1,1,2, TRICHLOROETHANE; ALL SPENT SOLVENT MIXTURES/BLENDS CONTAINING, BEFORE USE, A TOTAL OF TEN PERCENT OR MORE (BY VOLUME) OF ONE OR MORE OF THE ABOVE HALOGENATED SOLVENTS OR THOSE SOLVENTS LISTED IN F001, F004, AND F005; AND STILL BOTTOMS FROM THE RECOVERY OF THESE SPENT SOLVENTS AND SPENT SOLVENT MIXTURES.

F006 WASTEWATER TREATMENT SLUDGES FROM ELECTROPLATING OPERATIONS, EXCEPT FROM THE FOLLOWING PROCESSES: (1) SULFURIC ACID ANODIZING OF ALUMINUM; (2) TIN PLATING ON CARBON STEEL; (3) ZINC PLATING (SEGREGATED BASIS) ON CARBON STEEL; (4) ALUMINUM OR ZINC-ALUMINUM PLATING ON CARBON STEEL; (5) CLEANING/STRIPPING ASSOCIATED WITH TIN, ZINC, AND ALUMINUM PLATING ON CARBON STEEL; AND (6) CHEMICAL ETCHING AND MILLING OF ALUMINUM.

F007 SPENT CYANIDE PLATING BATH SOLUTIONS FROM ELECTROPLATING OPERATIONS.

F008 PLATING BATH RESIDUES FROM THE BOTTOM OF PLATING BATHS FROM ELECTROPLATING OPERATIONS IN WHICH CYANIDES ARE USED IN THE PROCESS.

# RCRARep Handler Detail Report

Report run on: October 10, 2014 10:45 AM

NJD096873724

## Waste Codes

F009 SPENT STRIPPING AND CLEANING BATH SOLUTIONS FROM ELECTROPLATING OPERATIONS  
IN WHICH CYANIDES ARE USED IN THE PROCESS.  
P030 CYANIDES (SOLUBLE CYANIDE SALTS), NOT OTHERWISE SPECIFIED  
P106 SODIUM CYANIDE (OR) SODIUM CYANIDE NA(CN)  
P121 ZINC CYANIDE (OR) ZINC CYANIDE ZN(CN)2  
U154 METHANOL (I) (OR) METHYL ALCOHOL (I)  
U228 ETHENE, TRICHLORO- (OR) TRICHLOROETHYLENE

## Certification

01/01/07 State/EPA	BRS-MANIFEST MASS UPDATE Signed: 01/01/07
01/01/06 State/EPA	BRS CYCLES 2001 2003 2005 BRS 2001 2003 2005 Signed: 01/01/06
04/02/04 03 Biennial	DIR. ENV. AFFAI OM P CHOPRA Signed: 04/02/04
09/26/96 95 Biennial	ENVIR ENGINEER ARTHUR E MALANGA Signed: 09/26/96
02/22/94 93 Biennial	ENV ENG'R ARTHUR E MALANGA Signed: 02/22/94
02/28/92 91 Biennial	PLANT MANAGER JOHN F FUSCO Signed: 02/28/92
04/12/90 89 Biennial	PLANT MANAGER JOHN FUSCO Signed: 04/12/90

## Biennial Reports Included/Excluded in Reports

04/02/04 03 Biennial	Site's Biennial Report data included in 2003 BR National report.
09/26/96 95 Biennial	Site probably included in 1995 BR National report.
02/22/94 93 Biennial	Site probably included in 1993 BR National report.
02/28/92 91 Biennial	Site probably included in 1991 BR National report.
04/12/90 89 Biennial	Site probably included in 1989 BR National report.



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

**WJD096873724**

INSTALLATION ADDRESS

**THE THOMAS & BETTS COMPANY  
36 BUTLER STREET  
ELIZABETH**

**NJ 07207**

**36 BUTLER STREET  
ELIZABETH**

**NJ 07207**



**U.S. ENVIRONMENTAL PROTECTION AGENCY**  
**NOTIFICATION OF HAZARDOUS WASTE ACTIVITY**

**INSTRUCTIONS:** If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

INSTALLATION'S EPA I.D. NO.	NJ00096873724
I. NAME OF INSTALLATION	
II. INSTALLATION MAILING ADDRESS	THOMAS & BETTS CORPORATION <del>36 BUTLER ST</del> <del>ELIZABETH, NJ 07207</del>
III. LOCATION OF INSTALLATION	<del>36 BUTLER ST</del> <del>ELIZABETH, NJ 07207</del>

**FOR OFFICIAL USE ONLY**

C		COMMENTS																																																																																																																																																																																																					
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1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		16		17		18		19		20		21		22		23		24		25		26		27		28		29		30		31		32		33		34		35		36		37		38		39		40		41		42		43		44		45		46		47		48		49		50		51		52		53		54		55		56		57		58		59		60		61		62		63		64		65		66		67		68		69		70		71		72		73		74		75		76		77		78		79		80		81		82		83		84		85		86		87		88		89		90		91		92		93		94		95		96		97		98		99		100	

### I. NAME OF INSTALLATION

[illegible]

## II. INSTALLATION MAILING ADDRESS

[illegible]

### III. LOCATION OF INSTALLATION

		STREET OR ROUTE NUMBER																													
C	S	3	6	B	U	T	L	E	R	S	T	R	E	E	T																45
18	16																														
																						CITY OR TOWN	ST.	ZIP CODE							
C	S	E	L	I	Z	A	B	E	T	H													N	J	0	7	2	0	7		
12	10																					40	48	46	44	42	40				

#### IV. INSTALLATION CONTACT

[illegible]

### V. OWNERSHIP

C		A. NAME OF INSTALLATION'S LEGAL OWNER																								
8		THE THOMAS & BETTS CORPORATION																								
15 16		B. TYPE OF OWNERSHIP (enter the appropriate letter into box)																								
F = FEDERAL M = NON-FEDERAL		VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))																								
M		<input checked="" type="checkbox"/> A. GENERATION <small>57</small>												<input type="checkbox"/> B. TRANSPORTATION (complete item VII) <small>58</small>												
		<input type="checkbox"/> C. TREAT/STORE/DISPOSE <small>59</small>												<input type="checkbox"/> D. UNDERGROUND INJECTION <small>60</small>												

**VII. MODE OF TRANSPORTATION** (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR    ☐ B. RAIL    ☐ C. HIGHWAY    ☐ D. WATER    ☐ E. OTHER (specify):

### VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION                  ☐ B. SUBSEQUENT NOTIFICATION (complete item C)

## IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

DETACH

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F001 23 - 26 7	2 F002 23 - 26 8	3 F006 23 - 26 9	4 F007 23 - 26 10	5 F008 23 - 26 11	6 F009 23 - 26 12
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B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 P030 23 - 26 37	32 P106 23 - 26 38	33 P121 23 - 26 39	34 U154 23 - 26 40	35 U228 23 - 26 41	36
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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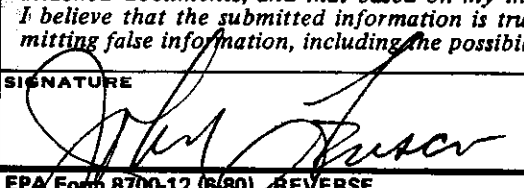
E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

<input type="checkbox"/> 1. IGNITABLE (D001)	<input type="checkbox"/> 2. CORROSIVE (D002)	<input type="checkbox"/> 3. REACTIVE (D003)	<input type="checkbox"/> 4. TOXIC (D000)
--	--	---	--

X. CERTIFICATION

DETACH

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) John Fusco - Plant Manager	DATE SIGNED 8/4/80
---	---	-----------------------



# T&B / Thomas & Betts

August 8, 1980

E. P. A. Region II  
Information Service Center  
26 Federal Plaza  
New York, New York 10278

Reference No. : NJD096873724

Dear Mr. Baker:

Please accept my apologies for this oversight on my part.

Part VI of the enclosed form is corrected and should meet all the requirements.

Sincerely yours,



---

A. E. Rottmann

Maintenance Mgr.

AER/oa

Enc.



T&B/Thomas & Betts, Division of Thomas & Betts Corporation  
36 Butler Street, Elizabeth, New Jersey 07207 201-351-8800 TELEX 83-3190

*Copy  
with 10/11*

096873724  
045708182  
002154433

**T&B / Thomas & Betts**

*Research  
# + took  
to see if copy  
in folder  
+ find file*

*NO answer  
To file*

November 18, 1980

*Com't  
found  
in files on report*

E.P.A. Region II  
Information Service Center  
26 Federal Plaza  
New York, New York 10278

Att: Manager

Dear Sir:

On October 30, 1980 I inquired about our Plant I.D. number.

Ms. Garcia informed me that we should receive the above by November 6, 1980, to date we are still without an I.D.

I would appreciate if you could expedite this matter at your earliest convenience.

Respectfully,

*A. E. Rottmann*

A. E. Rottmann

Maintenance Manager

AER/oa

**T&B**

T&B/Thomas & Betts, Division of Thomas & Betts Corporation  
36 Butler Street, Elizabeth, New Jersey 07207 201-351-8800 TELEX 83-3190

ENVIRONMENT PROTECTION AGENCY  
REGION II  
26 FEDERAL PLAZA  
NEW YORK, NEW YORK 10278

Page # 1 of 1

1. GENERATOR'S NAME Thomas & Betts Company 2. EPA ID NO. NJDO96873724  
3. ADDRESS 36 Butler Street - Elizabeth, NJ 07207  
4. TRANSPORTER'S NAME Inland Pollution Services, Inc. 5. EPA ID NO. NJDO00692160  
6. ADDRESS 8 Ebert Drive - Somerville, NJ 08876  
7. FACILITY'S NAME G. R. O. W. S., INC. 8. EPA ID NO. PAD 800424589  
9. ADDRESS New Ford Mill Road - Morrisville, Penna. 19067

10. MANIFEST NO.	DESCRIPTION OF WASTE	DOT HAZ. CLASS	QUANTITY	UNITS	EPA WASTE TYPE REJECTED
0069519	Oil Contaminated/Soil & Debris	N.A.	15	2	X-725

MAR 11 2 03 PM '92  
NEW YORK, N.Y. 10007

file

ENVIROMENT PROTECTION AGENCY  
REGION II  
26 FEDERAL PLAZA  
NEW YORK, NEW YORK 10278

Page 1 of 1

1. GENERATOR'S NAME The Thomas & Betts Co. 2. EPA ID NO. NJD096873724  
3. ADDRESS 36 Butler Street Elizabeth, New Jersey 07207  
4. TRANSPORTER'S NAME Jocar Trucking 5. EPA ID NO. NJT 350012183  
6. ADDRESS P.O. Box 1430 Toms River, New Jersey 08753  
7. FACILITY'S NAME Chemical Waste Management Inc. 8. EPA ID NO. ALT 000622464  
9. ADDRESS P.O. Box 55 Emelle, Alabama 35459

10. MANIFEST NO.	DESCRIPTION OF WASTE	DOT HAZ. CLASS	QUANTITY	UNITS	EPA WASTE TYPE	REJECTED
0055234	Cyanide Solution	Poison B	9954	1	F007	

RECEIVED  
MAR 1 2 03 PM '82  
ENVIRONMENTAL PROTECTION AGENCY  
NEW YORK, NY 10007

## HAZARDOUS WASTE REFERRAL CHECKLIST

Name of Violator: The Thomas & BETTS CORP.Date of Violation: 1/27/89Site Specific Code: 31A (major facility)

YES NO NA

## A. Referral Form:

- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. Accurate full name and address of violator | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Identification number (EPA or Incident #)  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Location of violation (Incl. TWP. & CO.)   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Block and Lot #'s                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Accurate Date of Discovery                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Accurate mailing address (Resp. Party)     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Accurate list of all citations             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. List of classes for all citations          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Past History past two years                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Signature of Section Chief & Bur. Chief   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

B. Copy of Investigation Report

C. Copy of Re-eval. Investigation Report

D. Copies of Field NOV's &amp; Supporting Data

E. Copy of Sampling Reports (If applicable)

F. Duplicate copy of Photo's

G. Copies of Corres. between DEP &amp; Violator

H. Timeliness HPV 45 days from Date of Discovery

I. Timeliness MPV/LPV 60 days from DOD

INVESTIGATORS INITIALS: BeSUPERVISORS INITIALS: 103 1.49

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT  
ENFORCEMENT ELEMENT

20-04-132

ENFORCEMENT REFERRAL

TO: Y.E. YACOV THRU J. STERLING DATE: FEB. 06. 89  
FROM: BOLESZAW CRATCHER REGION: M  
RE: The THOMAS BETTS Co, NJ 096873724, 36 BUTLER STR, ELIZABETH  
Name of Facility ID Number Location Address  
Lt. 02, 82, BL. 2, ELIZABETH, UNION  
Lot and Block Township County  
36 BUTLER STR, ELIZABETH, N.J. 07207, ARTHUR MANAUA - ENVR. ENG.  
Mailing Address Responsible Party

The attached inspection/investigation report(s) dated 1/27/89 is being referred and it is recommended a A.O. / PSP be issued for violations of:

NJAC 7:26- 9.3(b) - no engineering approval for the Department  
9.4(a) - no emergency drills conducted  
9.4(b) - no petition filed with the Department  
9.4(b) - no petition filed with local authorities

NJSA 58:10-

Suggested penalty: \_\_\_\_\_

ADDITIONAL COMMENTS:

To be reviewed: company has immediate  
approval to replace drums and to  
replace with drums and 3 in to  
replace with 1 in to

REVIEWED AND APPROVED BY:

Arthur Manaua 2/28/89  
Yakov Yacov 02/28/89

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT

5th Fl., 401 E. State St., Trenton, N.J. 08625

2 BABCOCK PL. W. ORANGE, N.J. 07052  
NOTICE OF VIOLATION

ID NO. NJ096873724 DATE Jan. 27, 89  
NAME OF FACILITY The Thomas BETTS CORP  
LOCATION OF FACILITY 36 BUTLER STR, ELIZABETH, N.J. 07207  
NAME OF OPERATOR ARTHUR MALANGA - ENVIR. ENG.

You are hereby NOTIFIED that during my inspection of your facility on the above date, the following violation(s) of the Solid Waste Management Act, (N.J.S.A. 13:1E-1 et seq.) and Regulations (N.J.A.C. 7:26-1 et seq.) promulgated thereunder and/or the Spill Compensation and Control Act, (N.J.S.A. 58:10-23.11 et seq.) and Regulations (N.J.A.C. 7:1E-1 et seq.) promulgated thereunder were observed. These violation(s) have been recorded as part of the permanent enforcement history of your facility.

DESCRIPTION OF VIOLATION N.J.A.C. 7:26-9.4(g)8 - no semi-annual drills conducted.  
N.J.A.C. 7:26-9.4(g)8i - failing to petition the Department for exemption,  
N.J.A.C. 7:26-9.4(g)8ii - failing to petition the Department for exemption excluding local officials

Remedial action to correct these violations must be initiated immediately and be completed by

Feb. 15, 89. Within fifteen (15) days of receipt of this Notice of Violation, you shall submit in writing, to the investigator issuing this notice at the above address, the corrective measures you have taken to attain compliance. The issuance of this document serves as notice to you that a violation has occurred and does not preclude the State of New Jersey, or any of its agencies from initiating further administrative or legal action, or from assessing penalties, with respect to this or other violations. Violations of these regulations are punishable by penalties of \$25,000 per violation.

Bobrow Locher  
Investigator, Division of Waste Management  
Department of Environmental Protection

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT

~~5th Fl., 401 E. State St., Trenton, N.J. 08625~~

2 BARBCK PL. W. ORANGE, N.J. 07052.  
NOTICE OF VIOLATION

ID NO. NJ0096873724 DATE Feb. 06. 89  
NAME OF FACILITY The THOMAS & BETTS CORP  
LOCATION OF FACILITY 36 BUTLER STR, ELIZABETH, N.J. 07207  
NAME OF OPERATOR ARTHUR MALANGA - ENVIRON. ENG.

You are hereby NOTIFIED that during my inspection of your facility on the above date, the following violation(s) of the Solid Waste Management Act, (N.J.S.A. 13:1E-1 et seq.) and Regulations (N.J.A.C. 7:26-1 et seq.) promulgated thereunder and/or the Spill Compensation and Control Act, (N.J.S.A. 58:10-23.11 et seq.) and Regulations (N.J.A.C. 7:1E-1 et seq.) promulgated thereunder were observed. These violation(s) have been recorded as part of the permanent enforcement history of your facility.

DESCRIPTION OF VIOLATION N.J.A.C. 7:26-9.3(b) - failing  
to obtain a written approval for above-  
ground work from the Department.

Remedial action to correct these violations must be initiated immediately and be completed by

Feb 15. 89.

. Within fifteen (15) days of receipt of this Notice of Violation, you shall submit in writing, to the investigator issuing this notice at the above address, the corrective measures you have taken to attain compliance. The issuance of this document serves as notice to you that a violation has occurred and does not preclude the State of New Jersey, or any of its agencies from initiating further administrative or legal action, or from assessing penalties, with respect to this or other violations. Violations of these regulations are punishable by penalties of \$25,000 per violation.



Investigator, Division of Waste Management  
Department of Environmental Protection



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT  
HAZARDOUS WASTE INSPECTION REPORT

DWM-029

GENERATOR INSPECTION REPORT

FACILITY INFORMATION

FACILITY NAME: The THOMAS & BETTS Co

FILE NUMBER: \_\_\_\_\_

VHT FACILITY FILE NUMBER: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

REGION: M

INSPECTION DATE: Jan. 27. 89

INCIDENT/CASE NUMBER: \_\_\_\_\_

INSPECTION TYPE: GEN/LB

RESPONSIBLE AGENCY CODE: S

INSPECTOR'S NAME: B. CZACHOR / D. BURGoyNE

INSPECTOR'S AGENCY: DHWM

INSPECTOR'S BUREAU: BFO - M

EPA ID NUMBER: NJ 0096873724

ADDRESS: 36 BUTLER STR  
ELIZABETH, N.J. 07206

LOT: 02, 82, BLOCK: 2

COUNTY: UNION

FACILITY PERSONNEL: ARTHUR MALANGA - ENVIRON. ENG.

ALFRED ROTTMANN - MANAGER  
TELEPHONE #: 201-351-8800

OTHER STATE/EPA PERSONNEL: BURGoyNE DANIEL - NJ DEP.

REPORT PREPARED BY: BOLESŁAW CZACHOR

REVIEWED BY: D. Sterling

DATE OF REVIEW: 2/15/89

REVISION: 3  
01/88

TIME IN: 1120

TIME OUT: \_\_\_\_\_

PHOTOS TAKEN ☐ YES ☒ NO

IF YES, HOW MANY? N/A

SAMPLE TAKEN ☐ YES ☒ NO

NO. OF SAMPLES N/A

NJDEP SAMPLE ID#: N/A

MANIFESTS REVIEWED ☒ YES ☐ NO

Number of manifests in compliance 106

Number of manifests not in compliance —

List manifest document numbers of those manifests not in compliance.

-A1-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS:

The THOMAS & BETTS CORP., located in ELIZABETH, N.J. with the EPA assigned ID number N.J.0096873724 is a manufacturer of metal components for electronic industry. The manufacturing process involves an operation, as following: metal stamping, electroplating, metal finishing, machining, metal pressing, cutting, and metal tooling. Basic metals used in production are steel, malleable iron and aluminum, and electroplating operations are done mostly with zinc and chromium.

The h.w. waste are generated primarily in metal parts degreasing operations, where naphtha is used and the waste type D001 is generated. The company ceased usage of any solvents since those substances are ~~very~~ highly regulated. The management of naphtha solvents and D001 waste is completely provided by Safety-Kleen Corp. The second source of h.w. waste generated on site is the w/w treatment plant for waste water from the electroplating operations. The highly advance w/w treatment plant

-A2-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

is designed that clean water is discharged into the public sewer (Joint Meeting permit # M0150) and sludge is run through filter press and dryer then it is drummed up into 55 Gtl drums and disposed off site as Foo6 waste. This type of waste goes to the Michigan Disposal Co., WAYNE, MI.

Also ~~there~~ some amounts of D002 are generated in electroplating operations. The metal machining operations results in generation of waste cutting oils and waste lubricating oils, X728, this type of waste is disposed off site with the FLOWEN oil Co. from Camden N.J. The company operate two aboveground waste oil storage tank, one of 2500 Gtl capacity is used for waste lubricating oil which is of higher quality, the second tank of 3000 Gtl capacity is used for <sup>storage</sup> mixture of oil and water (cutting oil). Both tanks appeared to be in good condition, diked and properly operated, however I noticed that company had no written approval to operate

-A3-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

those found from the BHWB, as per NJAC 7:26-9.3(b);

The physical inspection of the facility revealed that it was in good housekeeping and good management of hazardous waste containers which were in storage. Also the inspection of the documentation required under the RCRA revealed that it was in substantial compliance with the N.J. Hazardous Waste Regulations, except that there was no documentation that emergency response drills were conducted as per NJAC 7:26-9.4(p)8;

Also it should be noticed that company is a subject to LBR regulations because the listed FOG work is generated on site.

The company does not have a past history records in this office.

-B-

Describe the activities that result in the generation of hazardous waste.

- electroplating operations
- metal parts degreasing operations
- metal machining operations
- maintenance operations

Identify the hazardous waste located on site, and estimate the approximate quantities of each. (Identify Waste Codes)

D002 - 11 DRUMS

F006 - 18 DRUMS

X726 - ~ 1000 GAL

GENERAL CHECKLIST

GENERAL		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-7.4(a)1	Does the Generator have an EPA ID number?	<u>X</u>	—	—
HAZARDOUS WASTE DETERMINATION				
7:26-8.5(a)	Did the generator test its waste to determine whether it is hazardous?	<u>X</u>	—	—
7:26-8.5(b)	Did the generator determine the hazardous characteristics based upon knowledge of process?	<u>X</u>	—	—
	Is the waste hazardous?	<u>X</u>	—	—
7:26-8.5(d)	Were test results, waste analysis, or other determinations made in accordance with this section kept for three years from the date that the waste was last sent to an on-site or off-site TSF?	<u>X</u>	—	—
MANIFESTS				
7:26-7.4(a)4	Does each manifest have the following information? Please circle the elements missing and obtain a copy of the incomplete manifests. (List those manifests that are deficient on G-1).	<u>X</u>	—	—
7:26-7.4(a)4i	The generator's name, address and phone number.	<u>X</u>	—	—
7:26-7.4(a)4ii	The generator's EPA ID number.	<u>X</u>	—	—
7:26-7.4(a)4iii	The hauler(s) name, address phone number and NJ registration.	<u>X</u>	—	—
7:26-7.4(a)4iv	The hauler(s) EPA ID number.	<u>X</u>	—	—
7:26-7.4(a)4v	The name, address and phone number of the designated TSD facility.	<u>X</u>	—	—
7:26-7.4(a)4vi	The TSF's EPA ID number.	<u>X</u>	—	—
7:26-7.4(a)4v	The name, address and phone number of the designated TSD facility.	<u>X</u>	—	—
7:26-7.4(a)4vii	The name, type and quantity of hazardous waste being shipped, including such particulars as may be required regarding same?	<u>X</u>	—	—
7:26-7.4(a)4viii	Special handling instructions and any other information required on the form to be shipped by generator?	<u>X</u>	—	—

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-7.4(3)	Did the generator describe all N.O.S. wastes in Section J?	<u>X</u>	—	—
7:26-7.4(a)ix	When shipping hazardous waste to a waste reuse facility does the generator enter the waste reuse facility I.D. # in the section G of the Uniform Manifest?	<u>X</u>	—	—
7:26-7.4(a)5	Before allowing the manifested waste to leave the generator's property, did the generator:	<u>X</u>	—	—
7:26-7.4(a)5i	Sign the manifest certification by hand?	<u>X</u>	—	—
7:26-7.4(a)5ii	Obtain the handwritten signature of the initial transporter and date of acceptance on the manifest?	<u>X</u>	—	—
7:26-7.4(a)5iii	Retain one copy and forward one copy to the state of origin and one copy to the state of destination?	<u>X</u>	—	—
7:26-7.4(a)5iv	Provide the required numbers of copies for: generator, each hauler, owner/operator of the designated facility, as well as one copy returned to the generator by the facility owner/operator?	<u>X</u>	—	—
7:26-7.4(a)5v	Give the remaining copies of the manifest form to the hauler?	<u>X</u>	—	—
7:26-7.4(f)	Has the generator maintained facility records for three (3) years? (Manifest(s), exception report(s) and waste analysis)	<u>X</u>	—	—
7:26-7.4(h)1	Has the generator received signed copies of portion B (from the TSD facility ) of all manifests for waste shipped off site more than 35 days ago?	<u>X</u>	—	—
7:26-7.4(h)1	If not: Did the generator contact the hauler and/or the owner or operator of the TSDF and the NJDEP at (609) 292-8341 to inform the NJDEP of the situation?	—	—	<u>X</u>
7:26-7.4(h)2	Have exception reports been submitted to the Department covering any of these shipments made more than 45 days ago?	—	—	<u>X</u>



7:26-9.3

Accumulation Time

How is waste accumulated on site?

- ☒ Containers  
☐ Tanks (greater than 90 days)  
 (complete HWMF (TSD) Facility Checklist)  
☐ Tanks (less than 90 days)  
☒ Above ground — 5000 GAL for WASTE OIL  
☐ Below ground — 2500 GAL for Waste lubrication oil.  
☐ Surface impoundments  
 (complete HWMF (TSD) Facility Checklist)  
☐ Piles (complete HWMF checklist)

YES NO N/A

7:26-9.3(a)1

Is waste accumulated for more than  
90 days?— X —

STOP HERE IF THE HAZARDOUS WASTE MANAGEMENT FACILITY (TSF) CHECKLIST IS  
FILLED OUT.

Short term accumulation standards for generators who accumulate waste in containers and tanks for 90 days or less:

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
<u>Containers</u>				
7:26-9.4	What type of containers are used for storage. Describe size, type, quantity, and nature of waste (e.g. 12 fifty-five gallon drums of waste acetone). 11-DRUMS - D002 18-11 - For 6	—	—	—
7:26-9.4(d)2	Do the containers appear to be in good condition, not in danger of leaking?  If no, describe the problem (include number of containers involved.)	X	—	—
7:26-9.4(d)4i	Are all containers securely closed except those in use?	X	—	—
7:26-9.4(d)4iii	Do the containers appear to be properly handled or stored in a manner which will minimize the risk of the container rupturing and/or leaking?	X	—	—
7:26-9.4(d)4iv	Are containerized hazardous wastes segregated in storage by waste type?	X	—	—
7:26-9.4(d)4v	Is every container arranged so that its identification label is visible?	X	—	—
7:26-9.4(d)5	Is the container storage area inspected at least daily?	X	—	—
7:26-9.4(d)6	Are containers holding ignitable and reactive wastes located at least 50 (fifty) feet (15 meters) from the facilities property line?	X	—	—
7:26-7.2(a)	Did the owner/operator conspicuously label appropriate manifest number on all hazardous waste containers that are intended for shipment?	X	—	—
7:26-9.3(a)3	Is each container clearly dated with each period of accumulation so as to be visible for inspection?	X	—	—

YES NO N/A

7:26-7.2(b) Did the owner/operator insure that all containers used to transport hazardous waste off site are in conformance with applicable DOT regulations? (49CFR 171, 179) X — —

Tanks (Less than 90 day storage)

7:26-9.3(b) Does the generator accumulate hazardous waste on-site in an above ground tank? X — —

If yes, describe the tank(s):

- 1) Capacity 5000 GAL
- 2) Shell thickness
- 3) Material Construction steel insulated
- 4) Age of tank

7:26-9.3(b) Does the generator have written approval from the Department to store hazardous waste(s) in this tank(s) for ninety days or less? — X —

7:26-9.3(b)1 Does each tank(s) have sufficient shell thickness to ensure the tank will not collapse or rupture as specified by the Department? X — —

7:26-9.3(b)4 Is the tank(s) designed so that at least 99% of the volume of each of the tanks can be emptied by direct pumping or drainage? X — —

7:26-9.3(b)5 Is each tank(s) rendered empty (1% or less remaining) every 90 days or less? X — —

7:26-9.3(b)6 Are all wastes removed from the tank(s) shipped off-site to an authorized facility or placed in an on-site, authorized facility? X — —

7:26-9.3(b)8 If part of the tank is below grade, is it constructed to allow visual inspection of the tank, comparable to a totally above-ground tank and is secondary containment provided for the below grade part? — — X

7:26-10.5(c)1 Are materials which are incompatible with the material of construction of the tank(s) placed in the tank(s)? — X —

7:26-10.5(c)2 Does the generator use appropriate controls and practices to prevent overfilling? X — —

*level*  
*top alarm and red light*

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-10.5(c)211	For uncovered tanks, is there sufficient (two feet or acceptable documentation) freeboard to prevent overtopping by wave or wind action by or precipitation?	—	—	✓
7:26-9.3(b)3	Does each tank(s) or storage tank area have secondary containment?	✗	—	—
7:26-10.5(d)1	Is the containment system capable of collecting and holding spills, leaks, and precipitation?	✗	—	—
7:26-10.5(d)11	Is the base underlying the tank(s) free from cracks, gaps, and sufficiently impervious to contain leaks, spills, and accumulated rainfall until the collected material is detected and removed?	✗	—	—
7:26-10.5(d)11	Does the containment system consist of material compatible with the wastes being stored?	✗	—	—
7:26-10.5(d)111	Is the containment system sloped or otherwise designed to efficiently drain and remove liquids resulting from leaks, spills and precipitation?	✗	—	—
7:26-10.5(d)111	Is the tank protected from contact with accumulated liquids?	✗	—	—
7:26-10.5(d)1v	Does the containment system have sufficient capacity to contain ten percent of the volume of all tanks or the volume of the largest tanks whichever is greater?	✗	—	—
7:26-10.5(d)2	Is run-on into the containment area prevented?	✗	—	—
	If not, explain.			
7:26-10.5(d)3	Is precipitation removed from the pump or collection area in a timely manner to prevent blockage or overflow of the collection system?	✗	—	—
7:26-10.5(d)4	Is spilled or leaked waste removed from the pump or collection area daily?	✗	—	—

YES NO N/A

7:26-10.5(d)41	If the collected material is hazardous waste under NJAC 7:26-8, it is managed as a hazardous waste in accordance with all applicable requirements of this chapter?	<u>X</u>	—	—
7:26-9.4(g)4	<u>Personnel Training</u>  Have facility personnel successfully completed a program of classroom instruction or on-the-job training since six months after the date of their employment or assignment to the facility or to a new position at the facility?	<u>X</u>	—	—
7:26-9.4(g)5	Has facility personnel taken part in an annual review of initial training?	<u>X</u>	—	—
7:26-9.4(g)2	Is the program directed by a person trained in hazardous waste management procedures and does it include instruction which teaches facility personnel hazardous waste management procedures (including contingency plan to implementation) relevant to the positions in which they are employed?	<u>X</u>	—	—
	Is there written documentation of the following:			
7:26-9.4(g)61	Job title for each position at the facility related to hazardous waste management, and the name of the employee filling each job?	<u>X</u>	—	—
7:26-9.4(g)611	A written job description for each position related to hazardous waste management?	<u>X</u>	—	—
7:26-9.4(g)6111	A written job description on the type and amount of both introductory and continuing training that has been and will be given to personnel in jobs related to hazardous waste management?	<u>X</u>	—	—
7:26-9.4(g)61v	Documentation of actual training or experience received by personnel?	<u>X</u>	—	—
7:26-9.4(g)7	Are training records kept on all current employees until closure of the facility and training records kept on former employees for three years from their last date of employment?	<u>X</u>	—	—

YES NO N/A

7:26-9.6

Preparedness and prevention

Does the facility comply with preparedness and prevention requirements including maintaining:

7:26-9.6(b)1

An internal communications or alarm system?

X — —

7:26-9.6(b)2

A telephone or other device to summon emergency assistance from local authorities?

X — —

7:26-9.6(b)3

Portable fire equipment, spill control equipment, and decontamination equipment?

X — —

7:26-9.6(b)4

Water at adequate volume and pressure to supply water hose streams, or foam producing equipment, or automatic sprinklers, or water spray system?

X — —

7:26-9.6(c)

Is equipment tested and maintained?

— — —

7:26-9.6(d)1

Is there immediate access to communications or alarm systems during systems during handling of hazardous waste?

X — —

7:26-9.6(e)

Adequate aisle space (18") to allow unobstructed movement of personnel fire protection equipment, spill control equipment and decontamination equipment?

X — —

If no, please explain.

In your opinion, do the types of waste on site require all of the above procedures, or are some not required?

X — —

Explain.

7:26-9.6(f)

Has the facility made the following arrangements, as appropriate for the type waste handled on site:

X — —

7:26-9.6(f)1

Familiarize police, fire departments and emergency response teams with the layout of the facility and hazardous waste handled - associated hazardous places where facility personnel would normally be working, entrances and roads inside facility and possible evacuation routes.

X — —

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-9.6(f)2	Where more than one police and fire department might respond to an emergency, is there an agreement designating primary emergency authority to a specific police or fire department, and agreements with any others to provide support to the primary emergency authority?	—	—	X
7:26-9.6(f)3	Agreements with emergency response contractors, and equipment supplies?	X	—	—
7:26-9.6(f)4	Arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from fires, explosion, or discharges at the facility?	X	—	—
7:26-9.6(f)5	Arrangement with local fire departments to inspect the facility on a regular basis with at least two (2) inspections annually?	X	—	—
7:26-9.6(f)6	If authorities identified in (f)1 through 5, above decline to enter into such arrangements, has the owner, or operator documented this refusal in the operating record.	—	—	X
7:26-9.4(g)8	Are semi-annual drills conducted involving all employees and appropriate local authorities to test emergency response capabilities at the facility in accordance with the contingency plan and emergency procedures development pursuant to NJAC 7.26-9.7?	—	X	—
7:26-9.4(g)8i	If no, did the owner or operator petition the Department for an exemption from the semi annual drills requirement?	—	X	—
7:26-9.4(g)8ii	Did the owner or operator petition the Department for an exemption excluding some or all local officials in the semi annual drill requirements?	—	X	—
	If yes, did the owner operator provide those specific local officials with written approval of the exemption?	—	—	X

YES NO N/A

7:26-9.7

Contingency Plan and Emergency Procedures

7:26-9.7(a)

Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosions, hazards to human health or environment, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents into air, soil or surface water?

X \_ \_

7:26-9.7(b)

Are provisions of the plan carried out immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents which could threaten human health or the environment?

X \_ \_

7:26-9.7(c)

Does the contingency plan describes the actions facility personnel shall take in response to fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water at the facility?

X \_ \_

7:26-9.7(d)

Did the owner or operator prepare a Spill Prevention, Control, and Countermeasures (SPCC) Plan in accordance with 40 CFR 112 or 300 or a Discharge Prevention Containment and Countermeasure (DPPCC) Plan in accordance with N.J.A.C. 7:1E-4.1 et seq.

X \_ \_

If yes, did the owner or operator amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this section?

X \_ \_

7:26-9.7(e)

Does the plan describe arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services?

X \_ \_



YES NO N/A

- 7:26-9.7(f) Does the plan list names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinator and is this list kept up to date? Where more than one person is listed, one shall be named as primary emergency coordinator and others shall be listed in the order in which they will assume responsibility as alternates? ☒ \_ \_ \_
- 7:26-9.7(g) Does the plan include a list of all emergency equipment at the facility (such as fire extinguishing systems, spill control equipment, communications and alarm systems (internal and external) and decontamination equipment), where this equipment is required? Is the list up-to-date? In addition, does the plan include the location and physical description of each item on the list, and a brief outline of its capabilities? ☒ \_ \_ \_
- 7:26-9.7(h) Does the plan include an evacuation procedure for facility personnel where there is a possibility that evacuation could be necessary? Does this plan describe signal(s) to be used to begin evacuation, evacuation routes, and alternative evacuation routes (in case where the primary routes could be blocked by releases of hazardous waste or fires)? ☒ \_ \_ \_
- 7:26-9.7(i) Is a copy of the contingency plan and all revisions to the plan:
1. Maintained at the facility; ☒ \_ \_ \_
  2. Has the contingency plan been submitted to local authorities (police fire departments, emergency response teams)? ☒ \_ \_ \_
- 7:26-9.7(k) Is there an employee on site or on call at all times with the responsibility of coordinating, all emergency response measures? ☒ \_ \_ \_

Inspector: B. CZACHOR  
Address: 2 BABCOCK PL.  
W. ORANGE  
Telephone No: 201-667-3960

RCRA LAND DISPOSAL RESTRICTION  
GENERATOR CHECKLIST

I. HANDLER IDENTIFICATION

The Thomas' BETTS CORP. 36 BUTLER STR  
A. Handler Name B. Street (or other identifier)  
ELIZABETH, NJ. 07207 UNION  
C. City D. State E. Zip Code F. County Name  
manufacturer of metal parts for electronic industry.  
G. Nature of Business; Identification of Operations: SIC Code(s)  
NJD 096873724  
H. EPA ID #  
ARTHUR MAZANGA - ENVIR. ENG.  
I. Handler Contact (Name and Phone Number)

II. GENERATOR COMPLIANCE

Comments

A. Waste Identification

1. F-Solvents N/A

a. Does the handler generate the following wastes?

(i) F001, F002, F004, or F005 Yes ✓ No

(ii) F003 Yes ✓ No

If an F003 wastestream (listed solely for ignitability) has been mixed with a non-restricted solid or hazardous waste, does the resultant mixture exhibit the ignitability characteristic? Yes ✓ No

b. Source of the above: Form 8700-12     ; Part A     ; Part B     ; Biennial/Annual Reports      N/A  
other (specify)     

Appendix A is intended to assist the inspector and enforcement official in determining whether the facility is generating F-solvent wastes, if such wastes were not identified by the facility previously. If you are concerned that F-solvent wastes may be misclassified or mislabeled, turn to Appendix A-1. To assist in identifying potentially

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

misclassified F-solvents, Appendix A-2 presents a list of corresponding P and U wastes. Note concerns below: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Dioxin wastes *N/A*

- a. Does the handler report the generation of the following wastes? (The following industries may generate listed dioxin wastes: organic chemicals, pesticide or formulator.)

(i) P020 - P023, P026 - P027 ☐ Yes ☒ No  
(ii) P028 ☐ Yes ☒ No

[F-solvent BDLT standards are presented as Appendix B]

3. California Waste Identification *N/A*

- a. Does the facility handle any of the following wastes?

(i) D002 ☐ Yes ☒ No  
(ii) D004 - D011 ☐ Yes ☒ No

- b. Does the generator handle any hazardous wastes characterized by high concentrations of halogenated organic constituents (HOCs), metals, or cyanides? ☐ Yes ☒ No

[California waste standards are presented as Appendix C]

- c. Is the generator handling any of the F, K, P, or U wastes subject to the "soft hammer" that may qualify as California wastes due to HOC, metals, or cyanide content? See Appendix D for a listing of California constituents likely to be found by waste code. ☐ Yes ☒ No

- d. Has the generator conducted the paint filter test (Method 9095) [§268.32(i)]? ☐ Yes ☒ No\*

- e. Has the generator conducted any testing of these hazardous wastes to determine whether the concentrations qualify the hazardous wastes as California wastes? ☐ Yes ☒ No

If no, has the generator retained records documenting his "applied knowledge" that the hazardous waste is not a California waste?

☐ Yes ☒ No

-/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

If "no" is answered to both parts of this question, a violation is indicated. [§268.7(a)]

Describe the nature of the records: N/A

- f. Source of the above: Form 8700-12 \_\_\_\_\_; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; N/A  
other (specify) \_\_\_\_\_.

4. First Third Waste Identification

- a. Does the generator handle any of the wastes listed as First Third Wastes in §268.10? See Appendix E for listing. List First Third Wastes handled by the generator here:



Foam sludge from the w/w treatment plant.

- b. Does the generator handle any soft-hammer wastes (Appendices D-1, D-2, and F)? If so, list those wastes: No

- c. Are any of the soft-hammered wastes California wastes (see Appendix G)? \_\_\_\_\_ Yes ☒ No

If yes, the wastes must meet BDAT standards prior to disposal. N/A

- d. Has the Regional Administrator received demonstrations/certifications for all soft hammered wastes to be land disposed [§268.8(a)(2)]? \_\_\_\_\_ Yes ☒ No\*

- e. Source of the above: Form 8700-12 ☒; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; other (specify) \_\_\_\_\_.

B. BDAT Treatability Group - Treatment Standards Identification

1. Does the generator mix restricted wastes with different treatment standards for constituents of concern? \_\_\_\_\_ Yes ☒ No

2. If yes, did the generator select the most stringent treatment standard for the constituent of concern [§268.41(b)]? N/A \_\_\_\_\_ Yes \_\_\_\_\_ No\*

∴ A potential violation is indicated

GEN-3

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

3. P Solvents - - P/A

- a. Did the generator correctly determine the appropriate treatability group [§268.41] of the waste (e.g., wastewaters containing solvents, nonwastewater (i.e., < 1% TOC), pharmaceutical wastewaters containing spent methylene chloride, all other spent solvent wastes)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

4. California Wastes P/A

- a. Did the generator correctly determine the distinction between liquid hazardous wastes and non-liquid hazardous wastes that contain HOCs in concentrations greater than 1,000 mg/kg [§268.32(h)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

5. First Third Wastes

- a. Did the generator ascertain whether restricted wastes were appropriately assigned wastewater or nonwastewater designations (nonwastewaters are > 1% TOC and > 1% suspended solids) [§268.7(e)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

- b. Does the facility handle K061 wastes?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, were nonwastewaters appropriately classified in either the high or low zinc subcategories (≥15% Zn) [§268.7(a)] [§268.41(a)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

- c. Does the facility handle K101 or K102 wastes?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, were nonwastewaters appropriately classified in either the high or low arsenic subcategories [§268.7(a)] [§268.41(a)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

- d. Is there any reason to believe that the generator may have diluted the waste to change the applicable treatment standard (based on review of process operation, pipe routing, point of sampling)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

:/ A potential violation is indicated

GEN-4

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

C. Waste Analysis - -

1. Did the generator determine whether the waste exceeds treatment standards based on §268.7(a):

a. Knowledge of wastes ☒ Yes ☐ No

- (i) List wastes for which "applied knowledge" was used:

FOOG

b. TCLP ☐ Yes ☒ No

- (i) List wastes for which "TCLP" was used:

N/A

- (ii) Appendix D lists wastes for which treatment standards are expressed as concentrations in waste extract. Were any wastes handled by the generator subject to waste extract standards not tested using the TCLP? ☐ Yes ☐ No

If yes, list:

N/A

c. Total waste analysis ☒ Yes ☐ No

- d. If files were retained, describe content and basis of applied knowledge determination:

N/A

If determined by TCLP or total constituent analysis, provide date of last test, frequency of testing, and attach test results.

Dates/frequency:

N/A

Note which wastes were subjected to which tests:

N/A

Note any problems (e.g., inadequate analysis, variation of waste composition/generation for applied knowledge)

N/A

2/ A potential violation is indicated

GEN-5

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

- e. Were wastes tested using TCLP or total constituent analysis when a process or wastestream changed [§264.13(a)(3)(i) or §265.13(a)(3)(i)]?  
\_\_\_\_ Yes \_\_\_\_ No\*

2. Did the restricted wastes exceed applicable treatment group treatment standards upon generation [§268.7(a)(1)]?

List those that exceeded standards: FOG,

List those that did not exceed standards: NONE

3. Did the generator dilute the waste or the treatment residual so as to substitute for adequate treatment [§268.3]  
\_\_\_\_ Yes\* ✓ No

D. Management

1. Onsite management

- a. Were restricted wastes managed onsite?  
\_\_\_\_ Yes \_\_\_\_ ✓ No

If no, go to "2".

- b. For wastes that exceed treatment standards, was treatment in regulated units, storage for greater than 90 days, and/or disposal conducted?  
\_\_\_\_ Yes \_\_\_\_ No

If yes, TSDF checklist must be completed.

2. Offsite Management

- a. If restricted wastes exceed treatment standards, did generator provide treatment facility notification with each shipment? [268.7(a)(1)]:

(i) EPA Hazardous Waste Number? ✓ Yes \_\_\_\_ No\*

(ii) Corresponding treatment standard?  
✓ Yes \_\_\_\_ No\*

(iii) Manifest number? ✓ Yes \_\_\_\_ No\*

(iv) Waste analysis, if available?  
✓ Yes \_\_\_\_ No

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

Identify offsite treatment facilities CHEM-  
MET SERVICE, WAYANDOTTE, MI.

- b. If restricted wastes do not exceed treatment standards, did generator provide the disposal facility with a notice and certification including: N/A
- (i) EPA hazardous waste I.D. number? ☐ Yes ☒ No\*
- (ii) Corresponding treatment standard? ☐ Yes ☒ No\*
- (iii) Manifest number ☐ Yes ☒ No\*
- (iii) Certification regarding waste and that it meets treatment standards? ☐ Yes ☒ No\*

Identify land disposal facilities receiving the BDAT certified wastes N/A

- c. If the generator's waste is subject to a §268.5 case by case exemption, a §268.6 "no migration" exemption, or a nationwide variance (see Appendix E for restricted wastes subject to nationwide variances), does the generator's records indicate that he or she submits with each waste shipment [§268.7(a)(3)]: N/A

- (i) EPA Hazardous Waste Number? ☐ Yes ☒ No\*
- (ii) Corresponding Treatment Standards? ☐ Yes ☒ No\*
- (iii) All applicable prohibitions? ☐ Yes ☒ No\*
- (iv) The manifest number? ☐ Yes ☒ No\*
- (v) The date the wastes are subject to prohibitions? ☐ Yes ☒ No\*
- (vi) Does generator keep records of all notifications/certifications sent to offsite facilities? ☐ Yes ☒ No\*

2/ A potential violation is indicated

GEN-7



Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

List all prohibited wastes for which records are not provided per above [§268.7(a)(b)]:

N/A

Identify TSDFs receiving any prohibited wastes subject to any exemptions and variances:

N/A

- d. If handler generates a "soft hammer" waste, does the generator send with each "soft hammer" waste shipment to a TSDF and retain copies of, a notice that includes [268.7(a)(4)]:

N/A

The EPA Hazardous Waste Number? ☐ Yes ☐ No\*

Applicable prohibitions? ☐ Yes ☐ No\*

The manifest number? ☐ Yes ☐ No\*

Waste analysis data, where available? ☐ Yes ☐ No

- (i) Do the generator's records indicate that any soft-hammer wastes are destined for disposed in a landfill or surface impoundment [§268.33(f)]? ☐ Yes ☐ No

N/A

If yes, list facility of destination and waste of concern [§268.8(a)(2)]:

N/A

- (ii) Has the generator submitted demonstrations and certifications for each "soft-hammered" waste destined to be disposed in landfill or surface impoundment to the Regional Administrator prior to the shipment of waste to the TSDF [§268.7(a)(2)]? ☐ Yes ☐ No\*

N/A

- (iii) Has the generator retained a copy of the demonstration on site [§268.8(a)(3)-(a)(4)]? ☐ Yes ☐ No\*

- (iv) Has the generator retained copies of all §268.8 certifications sent to the TSDF [§268.7(a)(6)]? ☐ Yes ☐ No\*

A potential violation is indicated

GEN-8

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

- (v) Did the generator submit the demonstration to the receiving facility upon the initial shipment of the waste [§268.8(a)(3)-(a)(4)]? ☐ Yes ☒ No\*
- (vi) If the Regional Administrator has invalidated the certification, has the generator ceased shipment of the waste and do records indicate that the generator has informed all receiving facilities of the invalidation [§268.8(b)(3)]? ☐ Yes ☒ No\*

N/A

**E. Storage of Prohibited Waste**

1. Were prohibited wastes stored for greater than 90 days? ☐ Yes ☒ No

If yes, was facility operating as a TSD under interim status or final permit [§262.34(b)]?

☐ Yes ☒ No

If yes, TSDF Checklist must be completed.

**F. Treatment Using RCRA 264/265 Exempt Units or Processes**  
(i.e., boilers, furnaces, distillation units, wastewater treatment tanks, etc.)

N/A

1. Were treatment residuals generated from RCRA 264/265 exempt units or processes? ☐ Yes ☒ No

If yes, list type of treatment unit and processes

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, TSDF checklist must be completed.

The waste is not a subject to any treatment method after it is generated.

2/ A potential violation is indicated

GEN-9

## RCRA INSPECTION TRACKING

EPA ID number 096873724 Due for Inspection in Fiscal Quarter 3-89  
 Mandatory (Y/N) Y  
 Name/AKA The Thompsons Corp  
 Contact name/phone ARTHUR M. PLACIA 351-8800  
 Regulatory Status 01 Land Ban (Y/N) Y  
 Date regulatory status changed \_\_\_\_\_  
 Street, City, St. ZIP 36 BUTLER STR, ELIZABETH, N.J. 07207  
 County/Municipal code 20-04  
 VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
 Inspection date 1/27/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_  
unmarked 02/06/89 AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*									Enf. action date: <u>1/27/89</u>
VIOLATION	I						0			Sched. compliance: <u>2/15/89</u>
							0	2	X	Actual compliance: _____
	II						0			

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
 SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 01  
 Record review code \_\_\_\_\_  
 Responsible Agency code S  
 Inspectors last name CZACHOR  
 Agency Acronym DHWM Bureau acronym Bto-M  
 Comment \_\_\_\_\_

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
 Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
 Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code 9.3(b) Class (I or II) I  
 Violator Priority (high, med, low) high  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8 Class (I or II) II  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8i Class (I or II) II  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

9.4(g) 8ii

low II

## RCRA INSPECTION TRACKING

EPA ID number NJ096873728 Due for Inspection in Fiscal Quarter 3-89  
Mandatory (Y/N) Y  
Name/AKA THOMAS & BETTS CORP.  
Contact name/phone ARTHUR MALANCA 201-351-8800  
Regulatory Status OL Land Ban (Y/N) Y  
Date regulatory status changed \_\_\_\_\_  
Street, City, St, ZIP 36 BUTLER STR, ELIZABETH, NJ 07207  
County/Municipal code 20 04  
VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
Inspection date 2/15/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_

## AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*									Enf. action date: <u>2/27/8</u>
VIOLATION	I					X				Sched. compliance: <u>2/ /8</u>
	II					X				Actual compliance: <u>none</u>

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 05 Follow up  
Record review code \_\_\_\_\_  
Responsible Agency code 5  
Inspectors last name CHACHOR  
Agency Acronym DHWIM Bureau acronym BFC-M  
Comment \_\_\_\_\_

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
Violator Priority (high, med, low) < \_\_\_\_\_ >  
Violation Referred to < \_\_\_\_\_ >  
Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
Violator Priority (high, med, low) < \_\_\_\_\_ >  
Violation Referred to < \_\_\_\_\_ >  
Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
Violator Priority (high, med, low) < \_\_\_\_\_ >  
Violation Referred to < \_\_\_\_\_ >  
Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT  
HAZARDOUS WASTE INSPECTION REPORT

EPA

DWM-029

## GENERATOR INSPECTION REPORT

## FACILITY INFORMATION

FACILITY NAME: The THOMAS & BETTS Co

FILE NUMBER: \_\_\_\_\_

VHT FACILITY FILE NUMBER: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

REGION: MINSPECTION DATE: Jan. 27. 89

INCIDENT/CASE NUMBER: \_\_\_\_\_

INSPECTION TYPE: GEN/LBRESPONSIBLE AGENCY CODE: SINSPECTOR'S NAME: B. CZACHOR / D. BURGoyNEINSPECTOR'S AGENCY: DHWMINSPECTOR'S BUREAU: BFO - MEPA ID NUMBER: NJ.D096873724ADDRESS: 36 BUTLER STRELIZABETH, NJ. 07206LOT: 02, 82, BLOCK: 2COUNTY: UNIONFACILITY PERSONNEL: ARTHUR MALANGA - ENVIRON. ENG.TELEPHONE #: ALFRED ROTTMANN - MANAGER  
201-351-8800OTHER STATE/EPA PERSONNEL: BURGoyNE DANIEL - NJ. DEP.REPORT PREPARED BY: BOLESŁAW CZACHORREVIEWED BY: DAsterlingDATE OF REVIEW: 2/15/89REVISION: 3  
01/88

TIME IN: 1120

TIME OUT: \_\_\_\_\_

PHOTOS TAKEN ( ) YES ( ☒ ) NO

IF YES, HOW MANY? N/A

SAMPLE TAKEN ( ) YES ( ☒ ) NO

NO. OF SAMPLES N/A

NJDEP SAMPLE ID#: N/A

MANIFESTS REVIEWED ( ☒ ) YES ( ) NO

Number of manifests in compliance 106

Number of manifests not in compliance —

List manifest document numbers of those manifests not in compliance.

-A1-

SUMMARY OF FINDINGS**FACILITY DESCRIPTION AND OPERATIONS:**

The THOMAS & BETTS CORP., located in ELIZABETH, N.J. with the EPA assigned ID number NJD096873724 is a manufacturer of metal components for electronic industry. The manufacturing process involves an operation, as following: metal stamping, electroplating, metal finishing, machining, metal pressing, cutting, and metal tooling. Basic metals used in production are steel, malleable iron and aluminum, and electroplating operations are done mostly with zinc and chromium.

The h.w. waste are generated primarily in metal parts degreasing operations, where naphtha is used and the waste type D001 is generated. The company ceased usage of any solvents since those substances are highly regulated. The management of naphtha solvents and D001 waste is completely provided by Safety-Kleen Corp. The second source of h.w. waste generated on site is the w/w treatment plant for waste water from the electroplating operations. The highly advance w/w treatment plant

-A2-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

is designed that clean water is discharged into the public sewer (Joint Meeting permit # JMO150) and sludge is run through filter press and dryer then it is drummed up into 55 Gt drums and disposed off site as Foo6 waste. This type of waste goes to the Michigan Disposal Co., WAYNE, MI.

Also ~~some~~ some amounts of Doo2 are generated in electroplating operations.

The metal machining operations results in generation of waste cutting oils and waste lubricating oils, X728, this type of waste is disposed off site with the FLOWEN oil Co. from Camden N.J. The company operate two aboveground waste oil storage tank, one of 2500 Gt capacity is used for waste lubricating oil which is of higher quality, the second tank of 1000 Gt capacity is used for <sup>storage</sup> mixture of oil and water (cutting oil). Both tanks appeared to be in good condition, diked and properly operated, however I noticed that company had no written approval to operate



-A3-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

those found from the BHWB, as per NJAC 7:26-9.3(b);

The physical inspection of the facility revealed that it was in good housekeeping and good management of haz. waste containers which were in storage. Also the inspection of the documentation required under the RCRA revealed that it was in substantial compliance with the N.J. Haz. Waste Regulations, except that there was no documentation that emergency response drills were conducted as per NJAC 7:26-9.4(p)8;

Also it should be noticed that company is a subject to LTR regulations because the listed FOGG work is generated on site.

The company does not have a past history records in this office.

-B-

Describe the activities that result in the generation of hazardous waste.

- electroplating operations
- metal parts degreasing operations
- metal machining operations
- maintenance operations

Identify the hazardous waste located on site, and estimate the approximate quantities of each. (Identify Waste Codes)

D002 - 11 DRUMS

F006 - 18 DRUMS

X726 - ~ 1000 GAL.

GENERAL CHECKLISTGENERALYES   NO   N/A

7:26-7.4(a)1      Does the Generator have an EPA ID number?      X      —      —

HAZARDOUS WASTE DETERMINATION

7:26-8.5(a)      Did the generator test its waste to determine whether it is hazardous?      X      —      —

7:26-8.5(b)      Did the generator determine the hazardous characteristics based upon knowledge of process?      X      —      —

Is the waste hazardous?      X      —      —

7:26-8.5(d)      Were test results, waste analysis, or other determinations made in accordance with this section kept for three years from the date that the waste was last sent to an on-site or off-site TSF?      X      —      —

MANIFESTS

7:26-7.4(a)4      Does each manifest have the following information? Please circle the elements missing and obtain a copy of the incomplete manifests. (List those manifests that are deficient on G-1).      X      —      —

7:26-7.4(a)4i      The generator's name, address and phone number.      X      —      —

7:26-7.4(a)4ii      The generator's EPA ID number.      X      —      —

7:26-7.4(a)4iii      The hauler(s) name, address phone number and NJ registration.      X      —      —

7:26-7.4(a)4iv      The hauler(s) EPA ID number.      X      —      —

7:26-7.4(a)4v      The name, address and phone number of the designated TSD facility.      X      —      —

7:26-7.4(a)4vi      The TSF's EPA ID number.      X      —      —

7:26-7.4(a)4v      The name, address and phone number of the designated TSD facility.      X      —      —

7:26-7.4(a)4vii      The name, type and quantity of hazardous waste being shipped, including such particulars as may be required regarding same?      X      —      —

7:26-7.4(a)4viii      Special handling instructions and any other information required on the form to be shipped by generator?      X      —      —

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-7.4(3)	Did the generator describe all N.O.S. wastes in Section J?	<u>X</u>	—	—
7:26-7.4(a)ix	When shipping hazardous waste to a waste reuse facility does the generator enter the waste reuse facility I.D. # in the section G of the Uniform Manifest?	<u>X</u>	—	—
7:26-7.4(a)5	Before allowing the manifested waste to leave the generator's property, did the generator:	<u>X</u>	—	—
7:26-7.4(a)5i	Sign the manifest certification by hand?	<u>X</u>	—	—
7:26-7.4(a)5ii	Obtain the handwritten signature of the initial transporter and date of acceptance on the manifest?	<u>X</u>	—	—
7:26-7.4(a)5iii	Retain one copy and forward one copy to the state of origin and one copy to the state of destination?	<u>X</u>	—	—
7:26-7.4(a)5iv	Provide the required numbers of copies for: generator, each hauler, owner/operator of the designated facility, as well as one copy returned to the generator by the facility owner/operator?	<u>X</u>	—	—
7:26-7.4(a)5v	Give the remaining copies of the manifest form to the hauler?	<u>X</u>	—	—
7:26-7.4(f)	Has the generator maintained facility records for three (3) years? (Manifest(s), exception report(s) and waste analysis)	<u>X</u>	—	—
7:26-7.4(h)1	Has the generator received signed copies of portion B (from the TSD facility ) of all manifests for waste shipped off site more than 35 days ago?	<u>X</u>	—	—
7:26-7.4(h)1	If not: Did the generator contact the hauler and/or the owner or operator of the TSDF and the NJDEP at (609) 292-8341 to inform the NJDEP of the situation?	—	—	<u>X</u>
7:26-7.4(h)2	Have exception reports been submitted to the Department covering any of these shipments made more than 45 days ago?	—	—	<u>X</u>

7:26-9.3

Accumulation Time

How is waste accumulated on site?

- ☒ Containers  
☐ Tanks (greater than 90 days)  
 (complete HWMF (TSD) Facility Checklist)  
☐ Tanks (less than 90 days)  
☒ Above ground — 5000 GAL for WASTE OIL  
☐ Below ground — 2500 GAL for Waste lubrication oil.  
☐ Surface impoundments  
 (complete HWMF (TSD) Facility Checklist)  
☐ Piles (complete HWMF checklist)

YES NO N/A

7:26-9.3(a)1

Is waste accumulated for more than 90 days?

— ☒ —

STOP HERE IF THE HAZARDOUS WASTE MANAGEMENT FACILITY (TSF) CHECKLIST IS FILLED OUT.

Short term accumulation standards for generators who accumulate waste in containers and tanks for 90 days or less:

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
<u>Containers</u>				
7:26-9.4	What type of containers are used for storage. Describe size, type, quantity, and nature of waste (e.g. 12 fifty-five gallon drums of waste acetone). 11-DRUMS - D002 18-11 - For 6	—	—	—
7:26-9.4(d)2	Do the containers appear to be in good condition, not in danger of leaking?	X	—	—
	If no, describe the problem (include number of containers involved.)			
7:26-9.4(d)41	Are all containers securely closed except those in use?	X	—	—
7:26-9.4(d)4111	Do the containers appear to be properly handled or stored in a manner which will minimize the risk of the container rupturing and/or leaking?	X	—	—
7:26-9.4(d)41v	Are containerized hazardous wastes segregated in storage by waste type?	X	—	—
7:26-9.4(d)4v	Is every container arranged so that its identification label is visible?	X	—	—
7:26-9.4(d)5	Is the container storage area inspected at least daily?	X	—	—
7:26-9.4(d)6	Are containers holding ignitable and reactive wastes located at least 50 (fifty) feet (15 meters) from the facilities property line?	X	—	—
7:26-7.2(a)	Did the owner/operator conspicuously label appropriate manifest number on all hazardous waste containers that are intended for shipment?	X	—	—
7:26-9.3(a)3	Is each container clearly dated with each period of accumulation so as to be visible for inspection?	X	—	—

YES NO N/A

7:26-7.2(b) Did the owner/operator insure that all containers used to transport hazardous waste off site are in conformance with applicable DOT regulations? (49CFR 171, 179) X — —

Tanks (Less than 90 day storage)

7:26-9.3(b) Does the generator accumulate hazardous waste on-site in an above ground tank? X — —

If yes, describe the tank(s):

- 1) Capacity 5000 GAL
- 2) Shell thickness
- 3) Material Construction steel insulated
- 4) Age of tank

7:26-9.3(b) Does the generator have written approval from the Department to store hazardous waste(s) in this tank(s) for ninety days or less? — X —

7:26-9.3(b)1 Does each tank(s) have sufficient shell thickness to ensure the tank will not collapse or rupture as specified by the Department? X — —

7:26-9.3(b)4 Is the tank(s) designed so that at least 99% of the volume of each of the tanks can be emptied by direct pumping or drainage? X — —

7:26-9.3(b)5 Is each tank(s) rendered empty (1% or less remaining) every 90 days or less? X — —

7:26-9.3(b)6 Are all wastes removed from the tank(s) shipped off-site to an authorized facility or placed in an on-site, authorized facility? X — —

7:26-9.3(b)8 If part of the tank is below grade, is it constructed to allow visual inspection of the tank, comparable to a totally above-ground tank and is secondary containment provided for the below grade part? — — X

7:26-10.5(c)1 Are materials which are incompatible with the material of construction of the tank(s) placed in the tank(s)? — X —

7:26-10.5(c)2 Does the generator use appropriate controls and practices to prevent overfilling? X — —

level  
topograph and red light

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-10.5(c)211	For uncovered tanks, is there sufficient (two feet or acceptable documentation) freeboard to prevent overtopping by wave or wind action by or precipitation?	—	—	✓
7:26-9.3(b)3	Does each tank(s) or storage tank area have secondary containment?	✓	—	—
7:26-10.5(d)1	Is the containment system capable of collecting and holding spills, leaks, and precipitation?	✓	—	—
7:26-10.5(d)11	Is the base underlying the tank(s) free from cracks, gaps, and sufficiently impervious to contain leaks, spills, and accumulated rainfall until the collected material is detected and removed?	✓	—	—
7:26-10.5(d)11	Does the containment system consist of material compatible with the wastes being stored?	✓	—	—
7:26-10.5(d)111	Is the containment system sloped or otherwise designed to efficiently drain and remove liquids resulting from leaks, spills and precipitation?	✓	—	—
7:26-10.5(d)111	Is the tank protected from contact with accumulated liquids?	✓	—	—
7:26-10.5(d)1v	Does the containment system have sufficient capacity to contain ten percent of the volume of all tanks or the volume of the largest tanks whichever is greater?	✓	—	—
7:26-10.5(d)2	Is run-on into the containment area prevented?	✓	—	—
	If not, explain.			
7:26-10.5(d)3	Is precipitation removed from the pump or collection area in a timely manner to prevent blockage or overflow of the collection system?	✓	—	—
7:26-10.5(d)4	Is spilled or leaked waste removed from the pump or collection area daily?	✓	—	—



YES NO N/A

7:26-10.5(d)41	If the collected material is hazardous waste under NJAC 7:26-8, it is managed as a hazardous waste in accordance with all applicable requirements of this chapter?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)4	<u>Personnel Training</u>  Have facility personnel successfully completed a program of classroom instruction or on-the-job training since six months after the date of their employment or assignment to the facility or to a new position at the facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)5	Has facility personnel taken part in an annual review of initial training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)2	Is the program directed by a person trained in hazardous waste management procedures and does it include instruction which teaches facility personnel hazardous waste management procedures (including contingency plan to implementation) relevant to the positions in which they are employed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Is there written documentation of the following:			
7:26-9.4(g)61	Job title for each position at the facility related to hazardous waste management, and the name of the employee filling each job?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)611	A written job description for each position related to hazardous waste management?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)6111	A written job description on the type and amount of both introductory and continuing training that has been and will be given to personnel in jobs related to hazardous waste management?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)61v	Documentation of actual training or experience received by personnel?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-9.4(g)7	Are training records kept on all current employees until closure of the facility and training records kept on former employees for three years from their last date of employment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

YES NO N/A

7:26-9.6

Preparedness and prevention

Does the facility comply with preparedness and prevention requirements including maintaining:

7:26-9.6(b)1

An internal communications or alarm system?

X — —

7:26-9.6(b)2

A telephone or other device to summon emergency assistance from local authorities?

X — —

7:26-9.6(b)3

Portable fire equipment, spill control equipment, and decontamination equipment?

X — —

7:26-9.6(b)4

Water at adequate volume and pressure to supply water hose streams, or foam producing equipment, or automatic sprinklers, or water spray system?

X — —

7:26-9.6(c)

Is equipment tested and maintained?

— — —

7:26-9.6(d)1

Is there immediate access to communications or alarm systems during systems during handling of hazardous waste?

X — —

7:26-9.6(e)

Adequate aisle space (18") to allow unobstructed movement of personnel fire protection equipment, spill control equipment and decontamination equipment?

X — —

If no, please explain.

In your opinion, do the types of waste on site require all of the above procedures, or are some not required?

X — —

Explain.

7:26-9.6(f)

Has the facility made the following arrangements, as appropriate for the type waste handled on site:

X — —

7:26-9.6(f)1

Familiarize police, fire departments and emergency response teams with the layout of the facility and hazardous waste handled - associated hazardous places where facility personnel would normally be working, entrances and roads inside facility and possible evacuation routes.

X — —

YES NO N/A

7:26-9.6(f)2	Where more than one police and fire department might respond to an emergency, is there an agreement designating primary emergency authority to a specific police or fire department, and agreements with any others to provide support to the primary emergency authority?	—	—	X
7:26-9.6(f)3	Agreements with emergency response contractors, and equipment supplies?	X	—	—
7:26-9.6(f)4	Arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from fires, explosion, or discharges at the facility?	X	—	—
7:26-9.6(f)5	Arrangement with local fire departments to inspect the facility on a regular basis with at least two (2) inspections annually?	X	—	—
7:26-9.6(f)6	If authorities identified in (f)1 through 5, above decline to enter into such arrangements, has the owner, or operator documented this refusal in the operating record.	—	—	X
7:26-9.4(g)8	Are semi-annual drills conducted involving all employees and appropriate local authorities to test emergency response capabilities at the facility in accordance with the contingency plan and emergency procedures development pursuant to NJAC 7.26-9.7?	—	X	—
7:26-9.4(g)81	If no, did the owner or operator petition the Department for an exemption from the semi annual drills requirement?	—	X	—
7:26-9.4(g)811	Did the owner or operator petition the Department for an exemption excluding some or all local officials in the semi annual drill requirements?	—	X	—
	If yes, did the owner operator provide those specific local officials with written approval of the exemption?	—	—	X

YES NO N/A

7:26-9.7

Contingency Plan and Emergency Procedures

7:26-9.7(a)

Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosions, hazards to human health or environment, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents into air, soil or surface water?

☒ \_ \_ \_

7:26-9.7(b)

Are provisions of the plan carried out immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents which could threaten human health or the environment?

☒ \_ \_ \_

7:26-9.7(c)

Does the contingency plan describes the actions facility personnel shall take in response to fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water at the facility?

☒ \_ \_ \_

7:26-9.7(d)

Did the owner or operator prepare a Spill Prevention, Control, and Countermeasures (SPCC) Plan in accordance with 40 CFR 112 or 300 or a Discharge Prevention Containment and Countermeasure (DPCC) Plan in accordance with N.J.A.C. 7:1E-4.1 et seq.

☒ \_ \_ \_

If yes, did the owner or operator amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this section?

☒ \_ \_ \_

7:26-9.7(e)

Does the plan describe arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services?

☒ \_ \_ \_

YES NO N/A

- 7:26-9.7(f) Does the plan list names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinator and is this list kept up to date? Where more than one person is listed, one shall be named as primary emergency coordinator and others shall be listed in the order in which they will assume responsibility as alternates? ☒ \_ \_ \_
- 7:26-9.7(g) Does the plan include a list of all emergency equipment at the facility (such as fire extinguishing systems, spill control equipment, communications and alarm systems (internal and external) and decontamination equipment), where this equipment is required? Is the list up-to-date? In addition, does the plan include the location and physical description of each item on the list, and a brief outline of its capabilities? ☒ \_ \_ \_
- 7:26-9.7(h) Does the plan include an evacuation procedure for facility personnel where there is a possibility that evacuation could be necessary? Does this plan describe signal(s) to be used to begin evacuation, evacuation routes, and alternative evacuation routes (in case where the primary route could be blocked by releases of hazardous waste or fires)? ☒ \_ \_ \_
- 7:26-9.7(i) Is a copy of the contingency plan and all revisions to the plan:
1. Maintained at the facility; ☒ \_ \_ \_
  2. Has the contingency plan been submitted to local authorities (police fire departments, emergency response teams)? ☒ \_ \_ \_
- 7:26-9.7(k) Is there an employee on site or on call at all times with the responsibility of coordinating, all emergency response measures? ☒ \_ \_ \_

Inspector: B. CZACHOR  
Address: 2 BABCOCK PL.  
W. ORANGE  
Telephone No: 261-667-3960

RCRA LAND DISPOSAL RESTRICTION  
GENERATOR CHECKLIST

I. HANDLER IDENTIFICATION

The Thomas' BETTS CORP. 36 BUTLER STR  
A. Handler Name B. Street (or other identifier)  
ELIZABETH, NJ 07207 UNION  
C. City D. State E. Zip Code F. County Name  
manufacturer of metal parts for electronic industry.  
G. Nature of Business; Identification of Operations: SIC Code(s)  
NJD 096873724  
H. EPA ID #  
ARTHUR MAZANGA - ENVIR. ENG.  
I. Handler Contact (Name and Phone Number)

II. GENERATOR COMPLIANCE

Comments

A. Waste Identification

1. F-Solvents N/A

a. Does the handler generate the following wastes?

(i) F001, F002, F004, or F005 Yes ✓ No

(ii) F003 Yes ✓ No

If an F003 wastestream (listed solely for ignitability) has been mixed with a non-restricted solid or hazardous waste, does the resultant mixture exhibit the ignitability characteristic? Yes ✓ No

b. Source of the above: Form 8700-12     ; Part A     ; Part B     ; Biennial/Annual Reports      N/A  
other (specify)     

Appendix A is intended to assist the inspector and enforcement official in determining whether the facility is generating F-solvent wastes, if such wastes were not identified by the facility previously. If you are concerned that F-solvent wastes may be misclassified or mislabeled, turn to Appendix A-1. To assist in identifying potentially

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

misclassified F-solvents, Appendix A-2 presents a list of corresponding P and U wastes. Note concerns below: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Dioxin wastes *N/A*

- a. Does the handler report the generation of the following wastes? (The following industries may generate listed dioxin wastes: organic chemicals, pesticide or formulator.)

(i) F020 - F023, F026 - F027 ☐ Yes ☒ No  
(ii) F028 ☐ Yes ☒ No

[F-solvent BDLT standards are presented as Appendix B]

3. California Waste Identification *N/A*

- a. Does the facility handle any of the following wastes?

(i) D002 ☐ Yes ☒ No  
(ii) D004 - D011 ☐ Yes ☒ No

- b. Does the generator handle any hazardous wastes characterized by high concentrations of halogenated organic constituents (HOCs), metals, or cyanides? ☐ Yes ☒ No

[California waste standards are presented as Appendix C]

- c. Is the generator handling any of the F, K, P, or U wastes subject to the "soft hammer" that may qualify as California wastes due to HOC, metals, or cyanide content? See Appendix D for a listing of California constituents likely to be found by waste code. ☐ Yes ☒ No

- d. Has the generator conducted the paint filter test (Method 9095) [§268.32(i)]? ☐ Yes ☒ No\*

- e. Has the generator conducted any testing of these hazardous wastes to determine whether the concentrations qualify the hazardous wastes as California wastes? ☐ Yes ☒ No

If no, has the generator retained records documenting his "applied knowledge" that the hazardous waste is not a California waste?

☐ Yes ☒ No

2/ A potential violation is indicated

GEN-2

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

If "no" is answered to both parts of this question, a violation is indicated. [§268.7(a)]

Describe the nature of the records: N/A

- f. Source of the above: Form 8700-12 \_\_\_\_\_; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; N/A  
other (specify) \_\_\_\_\_.

4. First Third Waste Identification

- a. Does the generator handle any of the wastes listed as First Third Wastes in §268.10? See Appendix E for listing. List First Third Wastes handled by the generator here:



F006, sludge from the W/W treatment plant.

- b. Does the generator handle any soft-hammer wastes (Appendices D-1, D-2, and F)? If so, list those wastes: No

- c. Are any of the soft-hammered wastes California wastes (see Appendix G)? Yes ☒ No

If yes, the wastes must meet BDAT standards prior to disposal. N/A

- d. Has the Regional Administrator received demonstrations/certifications for all soft hammered wastes to be land disposed [§268.8(a)(2)]? Yes ☒ No\*

- e. Source of the above: Form 8700-12 ☒; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; other (specify) \_\_\_\_\_.

B. BDAT Treatability Group - Treatment Standards Identification

1. Does the generator mix restricted wastes with different treatment standards for constituents of concern? Yes ☒ No

2. If yes, did the generator select the most stringent treatment standard for the constituent of concern [§268.41(b)]? N/A Yes ☒ No\*

2/ A potential violation is indicated



Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

3. P Solvents - - N/A

- a. Did the generator correctly determine the appropriate treatability group [§268.41] of the waste (e.g., wastewaters containing solvents, nonwastewater (i.e., < 1% TOC), pharmaceutical wastewaters containing spent methylene chloride, all other spent solvent wastes)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

4. California Wastes P/A

- a. Did the generator correctly determine the distinction between liquid hazardous wastes and non-liquid hazardous wastes that contain HOCs in concentrations greater than 1,000 mg/kg [§268.32(h)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

5. First Third Wastes

- a. Did the generator ascertain whether restricted wastes were appropriately assigned wastewater or nonwastewater designations (nonwastewaters are > 1% TOC and > 1% suspended solids) [§268.7(a)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ No\*

- b. Does the facility handle K061 wastes?  
\_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

If yes, were nonwastewaters appropriately classified in either the high or low zinc subcategories (>15% Zn) [§268.7(a)] [§268.41(a)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ ☒ No\*

- c. Does the facility handle K101 or K102 wastes?  
\_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

If yes, were nonwastewaters appropriately classified in either the high or low arsenic subcategories [§268.7(a)] [§268.41(a)]?  
\_\_\_\_\_ Yes \_\_\_\_\_ ☒ No\*

- d. Is there any reason to believe that the generator may have diluted the waste to change the applicable treatment standard (based on review of process operation, pipe routing, point of sampling)?  
\_\_\_\_\_ Yes \_\_\_\_\_ ☒ No

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

C. Waste Analysis

1. Did the generator determine whether the waste exceeds treatment standards based on §268.7(a):

a. Knowledge of wastes ☒ Yes ☐ No

- (i) List wastes for which "applied knowledge" was used:

FOOG,

b. TCLP ☐ Yes ☒ No

- (i) List wastes for which "TCLP" was used:

N/A

- (ii) Appendix D lists wastes for which treatment standards are expressed as concentrations in waste extract. Were any wastes handled by the generator subject to waste extract standards not tested using the TCLP? ☐ Yes ☐ No

If yes, list: N/A

c. Total waste analysis ☒ Yes ☐ No

- d. If files were retained, describe content and basis of applied knowledge determination:

N/A

If determined by TCLP or total constituent analysis, provide date of last test, frequency of testing, and attach test results.

Dates/frequency: N/A

Note which wastes were subjected to which tests:

N/A

Note any problems (e.g., inadequate analysis, variation of waste composition/generation for applied knowledge) N/A

2/ A potential violation is indicated

GEN-5

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

- e. Were wastes tested using TCLP or total constituent analysis when a process or wastestream changed [§264.13(a)(3)(i) or §265.13(a)(3)(i)]? \_\_\_\_\_ Yes \_\_\_\_\_ No\*

2. Did the restricted wastes exceed applicable treatability group treatment standards upon generation [§268.7(a)(1)]?

List those that exceeded standards: FOOG,

List those that did not exceed standards: NONE

3. Did the generator dilute the waste or the treatment residual so as to substitute for adequate treatment [§268.3] \_\_\_\_\_ Yes\* ☒ No

D. Management

1. Onsite management

- a. Were restricted wastes managed onsite? \_\_\_\_\_ Yes ☒ No

If no, go to "2".

- b. For wastes that exceed treatment standards, was treatment in regulated units, storage for greater than 90 days, and/or disposal conducted? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, TSDP checklist must be completed.

2. Offsite Management

- a. If restricted wastes exceed treatment standards, did generator provide treatment facility notification with each shipment? [268.7(a)(1)]:

(i) EPA Hazardous Waste Number? ☒ Yes \_\_\_\_\_ No\*

(ii) Corresponding treatment standard? ☒ Yes \_\_\_\_\_ No\*

(iii) Manifest number? ☒ Yes \_\_\_\_\_ No\*

(iv) Waste analysis, if available? ☒ Yes \_\_\_\_\_ No

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

Identify offsite treatment facilities CHEM-  
MET SERVICE, WAYANDOTTE, MI.

- b. If restricted wastes do not exceed treatment standards, did generator provide the disposal facility with a notice and certification including: N/A
- (i) EPA hazardous waste I.D. number? Yes No\*
- (ii) Corresponding treatment standard? Yes No\*
- (iii) Manifest number Yes No\*
- (iii) Certification regarding waste and that it meets treatment standards? Yes No\*

Identify land disposal facilities receiving the BDAT certified wastes N/A

- c. If the generator's waste is subject to a §268.5 case by case exemption, a §268.6 "no migration" exemption, or a nationwide variance (see Appendix E for restricted wastes subject to nationwide variances), does the generator's records indicate that he or she submits with each waste shipment [§268.7(a)(3)]: N/A

- (i) EPA Hazardous Waste Number? Yes No\*
- (ii) Corresponding Treatment Standards? Yes No\*
- (iii) All applicable prohibitions? Yes No\*
- (iv) The manifest number? Yes No\*
- (v) The date the wastes are subject to prohibitions? Yes No\*
- (vi) Does generator keep records of all notifications/certifications sent to offsite facilities? Yes No\*

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

List all prohibited wastes for which records are not provided per above [§268.7(a)(b):

N/A

Identify TSDFs receiving any prohibited wastes subject to any exemptions and variances:

N/A

- d. If handler generates a "soft hammer" waste, does the generator send with each "soft hammer" waste shipment to a TSDF and retain copies of, a notice that includes [268.7(a)(4)]:

N/A

The EPA Hazardous Waste Number? ☐ Yes ☐ No\*

Applicable prohibitions? ☐ Yes ☐ No\*

The manifest number? ☐ Yes ☐ No\*

Waste analysis data, where available? ☐ Yes ☐ No

- (i) Do the generator's records indicate that any soft-hammer wastes are destined for disposed in a landfill or surface impoundment [§268.33(f)]? ☐ Yes ☐ No

N/A

If yes, list facility of destination and waste of concern [§268.8(a)(2)]:

N/A

- (ii) Has the generator submitted demonstrations and certifications for each "soft-hammered" waste destined to be disposed in landfill or surface impoundment to the Regional Administrator prior to the shipment of waste to the TSDF [§268.7(a)(2)]? ☐ Yes ☐ No\*

N/A

- (iii) Has the generator retained a copy of the demonstration on site [§268.8(a)(3)-(a)(4)]? ☐ Yes ☐ No\*

- (iv) Has the generator retained copies of all §268.8 certifications sent to the TSDF [§268.7(a)(6)]? ☐ Yes ☐ No\*

- A potential violation is indicated

GEN-8

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

- (v) Did the generator submit the demonstration to the receiving facility upon the initial shipment of the waste [§268.8(a)(3)-(a)(4)]? ☐ Yes ☐ No\*
- (vi) If the Regional Administrator has invalidated the certification, has the generator ceased shipment of the waste and do records indicate that the generator has informed all receiving facilities of the invalidation [§268.8(b)(3)]? ☐ Yes ☐ No\*

N/A

E. Storage of Prohibited Waste

1. Were prohibited wastes stored for greater than 90 days? ☐ Yes ☒ No

If yes, was facility operating as a TSD under interim status or final permit [§262.34(b)]? ☐ Yes ☐ No\*

If yes, TSDF Checklist must be completed.

F. Treatment Using RCRA 264/265 Exempt Units or Processes (i.e., boilers, furnaces, distillation units, waste-water treatment tanks, etc.)

N/A

1. Were treatment residuals generated from RCRA 264/265 exempt units or processes? ☐ Yes ☐ No

If yes, list type of treatment unit and processes

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, TSDF checklist must be completed.

The waste is not a subject to any treatment method after it is generated.

## RCRA INSPECTION TRACKING

EPA ID number NP096873724 Due for Inspection in Fiscal Quarter 3-89  
 Mandatory (Y/N) Y  
 Name/AKA The Thoningtons Corp  
 Contact name/phone ARTHUR MALABUCHA 351-8800  
 Regulatory Status 01 Land Ban (Y/N) Y  
 Date regulatory status changed \_\_\_\_\_  
 Street, City, St, ZIP 36 BUTLER STR, ELIZABETH, N.J. 07207  
 County/Municipal code 20-04  
 VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
 Inspection date 1/27/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_

~~commented~~ 02/06/89

## AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*						0			Enf. action date: <u>1/27/89</u>
VIOLETION	I						0	<u>2</u>	<u>X</u>	Sched. compliance: <u>1/27/89</u>
	II						0		<u>X</u>	Actual compliance: _____

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
 SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 01  
 Record review code \_\_\_\_\_  
 Responsible Agency code S  
 Inspectors last name CZACHOR  
 Agency Acronym DTHM Bureau acronym Bto - M  
 Comment 9.3(b) ISSW 2/6/89

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
 Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
 Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code 9.3(b) Class (I or II)  
 Violator Priority (high, med, low) high  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8 Class (I or II)  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8 Class (I or II)  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

9.4(g) 8 II  
low

## RCRA INSPECTION TRACKING

EPA ID number NJ096873728 Due for inspection in Fiscal Quarter 3-89  
 Mandatory (Y/N) Y  
 Name/AKA THOMAS & BETTS CORP.  
 Contact name/phone ARTHUR MALANGA (201) 351-8800  
 Regulatory Status 01 Land Ban (Y/N) Y  
 Date regulatory status changed \_\_\_\_\_  
 Street, City, St, ZIP 34 BUTLER ST, ELIZABETH, N.J. 07207  
 County/Municipal code 20 04  
 VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
 Inspection date 2/15/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_

## AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*									Enf. action date: <u>2/27/89</u>
VIO	I					X				Sched. compliance: <u>2/ /89</u>
	II					X				Actual compliance: <u>none</u>

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
 SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 05  
 Record review code \_\_\_\_\_  
 Responsible Agency code 5  
 Inspectors last name ETZACHER  
 Agency Acronym DHW M Bureau acronym BFO - M  
 Comment \_\_\_\_\_

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
 Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
 Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
 Violator Priority (high, med, low) < \_\_\_\_\_ >  
 Violation Referred to < \_\_\_\_\_ >  
 Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
 Violator Priority (high, med, low) < \_\_\_\_\_ >  
 Violation Referred to < \_\_\_\_\_ >  
 Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_  
 Violator Priority (high, med, low) < \_\_\_\_\_ >  
 Violation Referred to < \_\_\_\_\_ >  
 Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT  
HAZARDOUS WASTE INSPECTION REPORT

DWM-029

GENERATOR INSPECTION REPORT

FACILITY INFORMATION

FACILITY NAME: The THOMAS & BETTS Co

FILE NUMBER: \_\_\_\_\_

VHT FACILITY FILE NUMBER: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

REGION: M

INSPECTION DATE: Jan. 27. 89

INCIDENT/CASE NUMBER: \_\_\_\_\_

INSPECTION TYPE: GEN/LB

RESPONSIBLE AGENCY CODE: S

INSPECTOR'S NAME: B. CZACHOR / D. BURGoyNE

INSPECTOR'S AGENCY: DHWM

INSPECTOR'S BUREAU: BFO - M

EPA ID NUMBER: NJ-D096873724

ADDRESS: 36 BUTLER ST  
ELIZABETH, NJ 07206

LOT: 02, 82, BLOCK: 2

COUNTY: UNION

FACILITY PERSONNEL: ARTHUR MALANGA - ENVIRON. ENG.

ALFRED ROTTMANN - MANAGER  
TELEPHONE #: 201-351-8800

OTHER STATE/EPA PERSONNEL: BURGoyNE DANIEL - NJ DEP.

REPORT PREPARED BY: BOLESŁAW CZACHOR

REVIEWED BY: M. Sterling

DATE OF REVIEW: 2/15/89

REVISION: 3  
01/88

TIME IN: 1120

TIME OUT: \_\_\_\_\_

PHOTOS TAKEN ☐ YES ☒ NO

IF YES, HOW MANY? N/A

SAMPLE TAKEN ☐ YES ☒ NO

NO. OF SAMPLES N/A

NJDEP SAMPLE ID#: N/A

MANIFESTS REVIEWED ☒ YES ☐ NO

Number of manifests in compliance 106

Number of manifests not in compliance —

List manifest document numbers of those manifests not in compliance.

-A1-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS:

The THOMAS & BETTS CORP., located in ELIZABETH, N.J. with the EPA assigned ID number NJD096873724 is a manufacturer of metal components for electronic industry. The manufacturing process involves an operation, as following: metal stamping, electroplating, metal finishing, machining, metal pressing, cutting, and metal tooling. Basic metals used in production are steel, malleable iron and aluminum, and electroplating operations are done mostly with zinc and chromium.

The h.w. waste are generated primarily in metal parts degreasing operations, where naphtha is used and the waste type D001 is generated. The company ceased usage of any solvents since those substances are highly regulated. The management of naphtha solvents and D001 waste is completely provided by Safety-Kleen Corp. The second source of h.w. waste generated on site is the w/w treatment plant for waste water from the electroplating operations. The highly advance w/w treatment plant

-A2-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

is designed that clean water is discharged into the public sewer (Joint Meeting permit # JM 0150) and sludge is run through filter press and dryer then it is drummed up into 55 Gtl drums and disposed off site as Foo6 waste. This type of waste goes to the Michigan Disposal Co., WAYNE, MI.

Also ~~some~~ some amounts of D002 are generated in electroplating operations.

The metal machining operations results in generation of waste cutting oils and waste lubricating oils, X728, this type of waste is disposed off site with the FLOWEN oil Co. from Camden N.J. The company operates two aboveground waste

oil storage tanks, one of 2500 Gtl capacity is used for waste lubricating oil which is of higher quality, the second tank of 1000 Gtl capacity is used for <sup>storage</sup> mixture of oil and water (cutting oil).

Both tanks appeared to be in good condition, diked and properly operated, however I noticed that company had no written approval to operate

-A3-

SUMMARY OF FINDINGSFACILITY DESCRIPTION AND OPERATIONS (continued):

these books from the BHWB, as per NJAC 7:26-9.3(b);

The physical inspection of the facility revealed that it was in good housekeeping and good management of hazardous waste containers which were in storage. Also the inspection of the documentation required under the RCRA revealed that it was in substantial compliance with the N.J. Hazardous Waste Regulations, except that there was no documentation that emergency response drills were conducted as per NJAC 7:26-9.4(p)8;

Also it should be noticed that company is a subject to LTR regulations because the listed FOG work is generated on site.

The company does not have a past history records in this office.

-B-

Describe the activities that result in the generation of hazardous waste.

- electroplating operations
- metal parts degreasing operations
- metal machining operations
- maintenance operations

Identify the hazardous waste located on site, and estimate the approximate quantities of each. (Identify Waste Codes)

D002 - 11 DRUMS

F006 - 18 DRUMS

X726 - ~ 1000 GAL.

GENERAL CHECKLIST		YES	NO	N/A
<b>GENERAL</b>				
7:26-7.4(a)1	Does the Generator have an EPA ID number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>HAZARDOUS WASTE DETERMINATION</b>				
7:26-8.5(a)	Did the generator test its waste to determine whether it is hazardous?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-8.5(b)	Did the generator determine the hazardous characteristics based upon knowledge of process?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Is the waste hazardous?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-8.5(d)	Were test results, waste analysis, or other determinations made in accordance with this section kept for three years from the date that the waste was last sent to an on-site or off-site TSF?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>MANIFESTS</b>				
7:26-7.4(a)4	Does each manifest have the following information? Please circle the elements missing and obtain a copy of the incomplete manifests. (List those manifests that are deficient on G-1).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4i	The generator's name, address and phone number.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4ii	The generator's EPA ID number.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4iii	The hauler(s) name, address phone number and NJ registration.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4iv	The hauler(s) EPA ID number.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4v	The name, address and phone number of the designated TSD facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4vi	The TSF's EPA ID number.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4v	The name, address and phone number of the designated TSD facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4vii	The name, type and quantity of hazardous waste being shipped, including such particulars as may be required regarding same?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7:26-7.4(a)4viii	Special handling instructions and any other information required on the form to be shipped by generator?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-7.4(3)	Did the generator describe all N.O.S. wastes in Section J?	<u>X</u>	—	—
7:26-7.4(a)ix	When shipping hazardous waste to a waste reuse facility does the generator enter the waste reuse facility I.D. # in the section G of the Uniform Manifest?	<u>X</u>	—	—
7:26-7.4(a)5	Before allowing the manifested waste to leave the generator's property, did the generator:	<u>X</u>	—	—
7:26-7.4(a)5i	Sign the manifest certification by hand?	<u>X</u>	—	—
7:26-7.4(a)5ii	Obtain the handwritten signature of the initial transporter and date of acceptance on the manifest?	<u>X</u>	—	—
7:26-7.4(a)5iii	Retain one copy and forward one copy to the state of origin and one copy to the state of destination?	<u>X</u>	—	—
7:26-7.4(a)5iv	Provide the required numbers of copies for: generator, each hauler, owner/operator of the designated facility, as well as one copy returned to the generator by the facility owner/operator?	<u>X</u>	—	—
7:26-7.4(a)5v	Give the remaining copies of the manifest form to the hauler?	<u>X</u>	—	—
7:26-7.4(f)	Has the generator maintained facility records for three (3) years? (Manifest(s), exception report(s) and waste analysis)	<u>X</u>	—	—
7:26-7.4(h)1	Has the generator received signed copies of portion B (from the TSD facility) of all manifests for waste shipped off site more than 35 days ago?	<u>X</u>	—	—
7:26-7.4(h)1	If not: Did the generator contact the hauler and/or the owner or operator of the TSDF and the NJDEP at (609) 292-8341 to inform the NJDEP of the situation?	—	—	<u>X</u>
7:26-7.4(h)2	Have exception reports been submitted to the Department covering any of these shipments made more than 45 days ago?	—	—	<u>X</u>



7:26-9.3

Accumulation Time

How is waste accumulated on site?

- ☒ Containers  
☐ Tanks (greater than 90 days)  
 (complete HWMF (TSD) Facility Checklist)  
☐ Tanks (less than 90 days)  
☒ Above ground - 5000 GAL for WASTE OIL  
☐ Below ground - 2500 GAL for Waste lubrication oil  
☐ Surface impoundments  
 (complete HWMF (TSD) Facility Checklist)  
☐ Piles (complete HWMF checklist)

YES NO N/A

7:26-9.3(a)1

Is waste accumulated for more than  
90 days?— X —

STOP HERE IF THE HAZARDOUS WASTE MANAGEMENT FACILITY (TSF) CHECKLIST IS  
FILLED OUT.

Short term accumulation standards for generators who accumulate waste in containers and tanks for 90 days or less:

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
<u>Containers</u>				
7:26-9.4	What type of containers are used for storage. Describe size, type, quantity, and nature of waste (e.g. 12 fifty-five gallon drums of waste acetone). 11-DRUMS - D002 18-11 - For 6	—	—	—
7:26-9.4(d)2	Do the containers appear to be in good condition, not in danger of leaking?  If no, describe the problem (include number of containers involved.)	X	—	—
7:26-9.4(d)41	Are all containers securely closed except those in use?	X	—	—
7:26-9.4(d)4111	Do the containers appear to be properly handled or stored in a manner which will minimize the risk of the container rupturing and/or leaking?	X	—	—
7:26-9.4(d)41v	Are containerized hazardous wastes segregated in storage by waste type?	X	—	—
7:26-9.4(d)4v	Is every container arranged so that its identification label is visible?	X	—	—
7:26-9.4(d)5	Is the container storage area inspected at least daily?	X	—	—
7:26-9.4(d)6	Are containers holding ignitable and reactive wastes located at least 50 (fifty) feet (15 meters) from the facilities property line?	X	—	—
7:26-7.2(a)	Did the owner/operator conspicuously label appropriate manifest number on all hazardous waste containers that are intended for shipment?	X	—	—
7:26-9.3(a)3	Is each container clearly dated with each period of accumulation so as to be visible for inspection?	X	—	—

YES NO N/A

7:26-7.2(b) Did the owner/operator insure that all containers used to transport hazardous waste off site are in conformance with applicable DOT regulations? (49CFR 171, 179) X — —

Tanks (Less than 90 day storage)

7:26-9.3(b) Does the generator accumulate hazardous waste on-site in an above ground tank? X — —

If yes, describe the tank(s):

- 1) Capacity 5000 Gm
- 2) Shell thickness
- 3) Material Construction steel insulated
- 4) Age of tank

7:26-9.3(b) Does the generator have written approval from the Department to store hazardous waste(s) in this tank(s) for ninety days or less? — X —

7:26-9.3(b)1 Does each tank(s) have sufficient shell thickness to ensure the tank will not collapse or rupture as specified by the Department? X — —

7:26-9.3(b)4 Is the tank(s) designed so that at least 99% of the volume of each of the tanks can be emptied by direct pumping or drainage? X — —

7:26-9.3(b)5 Is each tank(s) rendered empty (1% or less remaining) every 90 days or less? X — —

7:26-9.3(b)6 Are all wastes removed from the tank(s) shipped off-site to an authorized facility or placed in an on-site, authorized facility? X — —

7:26-9.3(b)8 If part of the tank is below grade, is it constructed to allow visual inspection of the tank, comparable to a totally above-ground tank and is secondary containment provided for the below grade part? — — X

7:26-10.5(c)1 Are materials which are incompatible with the material of construction of the tank(s) placed in the tank(s)? — X —

7:26-10.5(c)2 Does the generator use appropriate controls and practices to prevent overfilling? X — —

level  
top of drum and red light

		<u>YES</u>	<u>NO</u>	<u>N/A</u>
7:26-10.5(c)2ii	For uncovered tanks, is there sufficient (two feet or acceptable documentation) freeboard to prevent overtopping by wave or wind action by or precipitation?	—	—	✓
7:26-9.3(b)3	Does each tank(s) or storage tank area have secondary containment?	✓	—	—
7:26-10.5(d)1	Is the containment system capable of collecting and holding spills, leaks, and precipitation?	✓	—	—
7:26-10.5(d)1i	Is the base underlying the tank(s) free from cracks, gaps, and sufficiently impervious to contain leaks, spills, and accumulated rainfall until the collected material is detected and removed?	✓	—	—
7:26-10.5(d)1i	Does the containment system consist of material compatible with the wastes being stored?	✓	—	—
7:26-10.5(d)1ii	Is the containment system sloped or otherwise designed to efficiently drain and remove liquids resulting from leaks, spills and precipitation?	✓	—	—
7:26-10.5(d)1ii	Is the tank protected from contact with accumulated liquids?	✓	—	—
7:26-10.5(d)iv	Does the containment system have sufficient capacity to contain ten percent of the volume of all tanks or the volume of the largest tanks whichever is greater?	✓	—	—
7:26-10.5(d)2	Is run-on into the containment area prevented?	✓	—	—
	If not, explain.			
7:26-10.5(d)3	Is precipitation removed from the pump or collection area in a timely manner to prevent blockage or overflow of the collection system?	✓	—	—
7:26-10.5(d)4	Is spilled or leaked waste removed from the pump or collection area daily?	✓	—	—

YES NO N/A

7:26-10.5(d)41	If the collected material is hazardous waste under NJAC 7:26-8, it is managed as a hazardous waste in accordance with all applicable requirements of this chapter?	<u>X</u>	—	—
7:26-9.4(g)4	<u>Personnel Training</u>  Have facility personnel successfully completed a program of classroom instruction or on-the-job training since six months after the date of their employment or assignment to the facility or to a new position at the facility?	<u>X</u>	—	—
7:26-9.4(g)5	Has facility personnel taken part in an annual review of initial training?	<u>X</u>	—	—
7:26-9.4(g)2	Is the program directed by a person trained in hazardous waste management procedures and does it include instruction which teaches facility personnel hazardous waste management procedures (including contingency plan to implementation) relevant to the positions in which they are employed?	<u>X</u>	—	—
	Is there written documentation of the following:			
7:26-9.4(g)61	Job title for each position at the facility related to hazardous waste management, and the name of the employee filling each job?	<u>X</u>	—	—
7:26-9.4(g)611	A written job description for each position related to hazardous waste management?	<u>X</u>	—	—
7:26-9.4(g)6111	A written job description on the type and amount of both introductory and continuing training that has been and will be given to personnel in jobs related to hazardous waste management?	<u>X</u>	—	—
7:26-9.4(g)61v	Documentation of actual training or experience received by personnel?	<u>X</u>	—	—
7:26-9.4(g)7	Are training records kept on all current employees until closure of the facility and training records kept on former employees for three years from their last date of employment?	<u>X</u>	—	—

YES NO N/A

7:26-9.6

Preparedness and prevention

Does the facility comply with preparedness and prevention requirements including maintaining:

7:26-9.6(b)1

An internal communications or alarm system?

X — —

7:26-9.6(b)2

A telephone or other device to summon emergency assistance from local authorities?

X — —

7:26-9.6(b)3

Portable fire equipment, spill control equipment, and decontamination equipment?

X — —

7:26-9.6(b)4

Water at adequate volume and pressure to supply water hose streams, or foam producing equipment, or automatic sprinklers, or water spray system?

X — —

7:26-9.6(c)

Is equipment tested and maintained?

— — —

7:26-9.6(d)1

Is there immediate access to communications or alarm systems during systems during handling of hazardous waste?

X — —

7:26-9.6(e)

Adequate aisle space (18") to allow unobstructed movement of personnel fire protection equipment, spill control equipment and decontamination equipment?

X — —

If no, please explain.

In your opinion, do the types of waste on site require all of the above procedures, or are some not required?

X — —

Explain.

7:26-9.6(f)

Has the facility made the following arrangements, as appropriate for the type waste handled on site:

X — —

7:26-9.6(f)1

Familiarize police, fire departments and emergency response teams with the layout of the facility and hazardous waste handled - associated hazardous places where facility personnel would normally be working, entrances and roads inside facility and possible evacuation routes.

X — —

YES NO N/A

7:26-9.6(f)2	Where more than one police and fire department might respond to an emergency, is there an agreement designating primary emergency authority to a specific police or fire department, and agreements with any others to provide support to the primary emergency authority?	—	—	X
7:26-9.6(f)3	Agreements with emergency response contractors, and equipment supplies?	X	—	—
7:26-9.6(f)4	Arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the types of injuries or illnesses which could result from fires, explosion, or discharges at the facility?	X	—	—
7:26-9.6(f)5	Arrangement with local fire departments to inspect the facility on a regular basis with at least two (2) inspections annually?	X	—	—
7:26-9.6(f)6	If authorities identified in (f)1 through 5, above decline to enter into such arrangements, has the owner, or operator documented this refusal in the operating record.	—	—	X
7:26-9.4(g)8	Are semi-annual drills conducted involving all employees and appropriate local authorities to test emergency response capabilities at the facility in accordance with the contingency plan and emergency procedures development pursuant to NJAC 7.26-9.7?	—	X	—
7:26-9.4(g)81	If no, did the owner or operator petition the Department for an exemption from the semi annual drills requirement?	—	X	—
7:26-9.4(g)811	Did the owner or operator petition the Department for an exemption excluding some or all local officials in the semi annual drill requirements?	—	X	—
	If yes, did the owner operator provide those specific local officials with written approval of the exemption?	—	—	X

YES NO N/A

7:26-9.7

Contingency Plan and Emergency Procedures

7:26-9.7(a)

Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosions, hazards to human health or environment, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents into air, soil or surface water?

☒ \_ \_ \_

7:26-9.7(b)

Are provisions of the plan carried out immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents which could threaten human health or the environment?

☒ \_ \_ \_

7:26-9.7(c)

Does the contingency plan describes the actions facility personnel shall take in response to fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water at the facility?

☒ \_ \_ \_

7:26-9.7(d)

Did the owner or operator prepare a Spill Prevention, Control, and Countermeasures (SPCC) Plan in accordance with 40 CFR 112 or 300 or a Discharge Prevention Containment and Countermeasure (DPCC) Plan in accordance with N.J.A.C. 7:1E-4.1 at seq.

☒ \_ \_ \_

If yes, did the owner or operator amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this section?

☒ \_ \_ \_

7:26-9.7(e)

Does the plan describe arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams to coordinate emergency services?

☒ \_ \_ \_



YES NO N/A

7:26-9.7(f)

Does the plan list names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinator and is this list kept up to date? Where more than one person is listed, one shall be named as primary emergency coordinator and others shall be listed in the order in which they will assume responsibility as alternates?

X \_ \_

7:26-9.7(g)

Does the plan include a list of all emergency equipment at the facility (such as fire extinguishing systems, spill control equipment, communications and alarm systems (internal and external) and decontamination equipment), where this equipment is required? Is the list up-to-date? In addition, does the plan include the location and physical description of each item on the list, and a brief outline of its capabilities?

X \_ \_

7:26-9.7(h)

Does the plan include an evacuation procedure for facility personnel where there is a possibility that evacuation could be necessary? Does this plan describe signal(s) to be used to begin evacuation, evacuation routes, and alternative evacuation routes (in case where the primary route could be blocked by releases of hazardous waste or fires)?

X \_ \_

7:26-9.7(i)

Is a copy of the contingency plan and all revisions to the plan:

1. Maintained at the facility;
2. Has the contingency plan been submitted to local authorities (police fire departments, emergency response teams)?

X \_ \_

X \_ \_

7:26-9.7(k)

Is there an employee on site or on call at all times with the responsibility of coordinating, all emergency response measures?

X \_ \_

Inspector: B. CZACHOR  
Address: 2 BABCOCK PL.  
W. CRANCE  
Telephone No: 261-667-3960

RCRA LAND DISPOSAL RESTRICTION  
GENERATOR CHECKLIST

I. HANDLER IDENTIFICATION

The Thomas; BETTS CORP. 36 BUTLER STR  
A. Handler Name B. Street (or other identifier)  
ELIZABETH, NJ 07207 UNION  
C. City D. State E. Zip Code F. County Name  
manufacturer of metal parts for electronic industry.  
G. Nature of Business; Identification of Operations: SIC Code(s)  
NJD 096873724  
H. EPA ID #  
ARTHUR MAZANGA - ENVIR. ENG.  
I. Handler Contact (Name and Phone Number)

II. GENERATOR COMPLIANCE

Comments

A. Waste Identification

1. F-Solvents N/A

a. Does the handler generate the following wastes?

(i) F001, F002, F004, or F005 Yes ✓ No

(ii) F003 Yes ✓ No

If an F003 wastestream (listed solely for ignitability) has been mixed with a non-restricted solid or hazardous waste, does the resultant mixture exhibit the ignitability characteristic? Yes ✓ No

b. Source of the above: Form 8700-12     ; Part A     ; Part B     ; Biennial/Annual Reports      N/A  
other (specify)     

Appendix A is intended to assist the inspector and enforcement official in determining whether the facility is generating F-solvent wastes, if such wastes were not identified by the facility previously. If you are concerned that F-solvent wastes may be misclassified or mislabeled, turn to Appendix A-1. To assist in identifying potentially

Handwritten Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

misclassified F-solvents, Appendix A-2 presents a list of corresponding P and U wastes. Note concerns below: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Dioxin wastes *N/A*

- a. Does the handler report the generation of the following wastes? (The following industries may generate listed dioxin wastes: organic chemicals, pesticide or formulator.)

(i) F020 - F023, F026 - F027 ☐ Yes ☒ No  
(ii) F028 ☐ Yes ☒ No

[F-solvent BDLT standards are presented as Appendix B]

3. California Waste Identification *N/A*

- a. Does the facility handle any of the following wastes?

(i) D002 ☐ Yes ☒ No  
(ii) D004 - D011 ☐ Yes ☒ No

- b. Does the generator handle any hazardous wastes characterized by high concentrations of halogenated organic constituents (HOCs), metals, or cyanides? ☐ Yes ☒ No

[California waste standards are presented as Appendix C]

- c. Is the generator handling any of the F, K, P, or U wastes subject to the "soft hammer" that may qualify as California wastes due to HOC, metals, or cyanide content? See Appendix D for a listing of California constituents likely to be found by waste code. ☐ Yes ☒ No

- d. Has the generator conducted the paint filter test (Method 9095) [§268.32(1)]? ☐ Yes ☒ No\*

- e. Has the generator conducted any testing of these hazardous wastes to determine whether the concentrations qualify the hazardous wastes as California wastes? ☐ Yes ☒ No

If no, has the generator retained records documenting his "applied knowledge" that the hazardous waste is not a California waste? ☐ Yes ☒ No

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

If "no" is answered to both parts of this question, a violation is indicated. [§268.7(a)]

Describe the nature of the records: N/A

- f. Source of the above: Form 8700-12 \_\_\_\_\_; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; N/A  
other (specify) \_\_\_\_\_.

4. First Third Waste Identification

- a. Does the generator handle any of the wastes listed as First Third Wastes in §268.10? See Appendix E for listing. List First Third Wastes handled by the generator here:

⊗ → FOG, sludge from the w/w  
treatment plant.

- b. Does the generator handle any soft-hammer wastes (Appendices D-1, D-2, and F)? If so, list those wastes: No

- c. Are any of the soft-hammered wastes California wastes (see Appendix G)? Yes ☒ No

If yes, the wastes must meet BDAT standards prior to disposal. N/A

- d. Has the Regional Administrator received demonstrations/certifications for all soft hammered wastes to be land disposed [§268.8(a)(2)]? Yes ☒ No\*

- e. Source of the above: Form 8700-12 ☒; Part A \_\_\_\_\_; Part B \_\_\_\_\_; Biennial/Annual Report \_\_\_\_\_; other (specify) \_\_\_\_\_.

B. BDAT Treatability Group - Treatment Standards Identification

1. Does the generator mix restricted wastes with different treatment standards for constituents of concern? Yes ☒ No

2. If yes, did the generator select the most stringent treatment standard for the constituent of concern [§268.41(b)]? N/A Yes ☐ No\*

⚠ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

3. P Solvents - - P/A

- a. Did the generator correctly determine the appropriate treatability group [§268.41] of the waste (e.g., wastewaters containing solvents, nonwastewater (i.e., < 1% TOC), pharmaceutical wastewaters containing spent methylene chloride, all other spent solvent wastes)?  
\_\_\_\_ Yes \_\_\_\_ No\*

4. California Wastes P/A

- a. Did the generator correctly determine the distinction between liquid hazardous wastes and non-liquid hazardous wastes that contain HOCs in concentrations greater than 1,000 mg/kg [§268.32(h)]?  
\_\_\_\_ Yes \_\_\_\_ No\*

5. First Third Wastes

- a. Did the generator ascertain whether restricted wastes were appropriately assigned wastewater or nonwastewater designations (nonwastewaters are > 1% TOC and > 1% suspended solids) [§268.7(a)]?  
\_\_\_\_ Yes \_\_\_\_ No\*

- b. Does the facility handle K061 wastes?  
\_\_\_\_ Yes \_\_\_\_ ☒ No

If yes, were nonwastewaters appropriately classified in either the high or low zinc subcategories (≥15% Zn) [§268.7(a)] [§268.41(a)]?  
\_\_\_\_ Yes \_\_\_\_ ☒ No\*

- c. Does the facility handle K101 or K102 wastes?  
\_\_\_\_ Yes \_\_\_\_ ☒ No

If yes, were nonwastewaters appropriately classified in either the high or low arsenic subcategories [§268.7(a)] [§268.41(a)]?  
\_\_\_\_ Yes \_\_\_\_ ☒ No\*

- d. Is there any reason to believe that the generator may have diluted the waste to change the applicable treatment standard (based on review of process operation, pipe routing, point of sampling)?  
\_\_\_\_ Yes \_\_\_\_ ☒ No

2/ A potential violation is indicated

GEN-4

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

C. Waste Analysis - -

1. Did the generator determine whether the waste exceeds treatment standards based on §268.7(a):

a. Knowledge of wastes ☒ Yes ☐ No

- (i) List wastes for which "applied knowledge" was used: FOOG

b. TCLP ☐ Yes ☒ No

- (i) List wastes for which "TCLP" was used: N/A

- (ii) Appendix D lists wastes for which treatment standards are expressed as concentrations in waste extract. Were any wastes handled by the generator subject to waste extract standards not tested using the TCLP? ☐ Yes ☐ No

If yes, list: N/A

c. Total waste analysis ☒ Yes ☐ No

- d. If files were retained, describe content and basis of applied knowledge determination: N/A

If determined by TCLP or total constituent analysis, provide date of last test, frequency of testing, and attach test results.

Dates/frequency: N/A

Note which wastes were subjected to which tests:

N/A

Note any problems (e.g., inadequate analysis, variation of waste composition/generation for applied knowledge) N/A

2/ A potential violation is indicated

GEN-5

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

- e. Were wastes tested using TCLP or total constituent analysis when a process or wastestream changed [§264.13(a)(3)(i) or §265.13(a)(3)(i)]?  
\_\_\_\_ Yes \_\_\_\_ No\*

2. Did the restricted wastes exceed applicable treatability group treatment standards upon generation [§268.7(a)(1)]?

List those that exceeded standards: FOOG,

List those that did not exceed standards: NONE

3. Did the generator dilute the waste or the treatment residual so as to substitute for adequate treatment [§268.3]  
\_\_\_\_ Yes\* ✓ No

D. Management

1. Onsite management

- a. Were restricted wastes managed onsite?  
\_\_\_\_ Yes ✓ No

If no, go to "2".

- b. For wastes that exceed treatment standards, was treatment in regulated units, storage for greater than 90 days, and/or disposal conducted?  
\_\_\_\_ Yes \_\_\_\_ No

If yes, TSDP checklist must be completed.

2. Offsite Management

- a. If restricted wastes exceed treatment standards, did generator provide treatment facility notification with each shipment? [268.7(a)(1)]:

(i) EPA Hazardous Waste Number? ✓ Yes \_\_\_\_ No\*

(ii) Corresponding treatment standard? ✓ Yes \_\_\_\_ No\*

(iii) Manifest number? ✓ Yes \_\_\_\_ No\*

(iv) Waste analysis, if available? ✓ Yes \_\_\_\_ No

2/ A potential violation is indicated

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

Identify offsite treatment facilities CHEM-  
MEI SERVICE, WAYANDOTTE, MI.

- b. If restricted wastes do not exceed treatment standards, did generator provide the disposal facility with a notice and certification including: N/A
- (i) EPA hazardous waste I.D. number? Yes No\*
- (ii) Corresponding treatment standard? Yes No\*
- (iii) Manifest number Yes No\*
- (iii) Certification regarding waste and that it meets treatment standards? Yes No\*

Identify land disposal facilities receiving the BDAT certified wastes N/A

- c. If the generator's waste is subject to a §268.5 case by case exemption, a §268.6 "no migration" exemption, or a nationwide variance (see Appendix E for restricted wastes subject to nationwide variances), does the generator's records indicate that he or she submits with each waste shipment [§268.7(a)(3)]: N/A

- (i) EPA Hazardous Waste Number? Yes No\*
- (ii) Corresponding Treatment Standards? Yes No\*
- (iii) All applicable prohibitions? Yes No\*
- (iv) The manifest number? Yes No\*
- (v) The date the wastes are subject to prohibitions? Yes No\*
- (vi) Does generator keep records of all notifications/certifications send to offsite facilities? Yes No\*

2/ A potential violation is indicated

GEN-7



Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

List all prohibited wastes for which records are not provided per above [§268.7(a)(b):

N/A

Identify TSDFs receiving any prohibited wastes subject to any exemptions and variances:

N/A

- d. If handler generates a "soft hammer" waste, does the generator send with each "soft hammer" waste shipment to a TSDF and retain copies of, a notice that includes [268.7(a)(4)]:

N/A

The EPA Hazardous Waste Number? ☐ Yes ☐ No\*

Applicable prohibitions? ☐ Yes ☐ No\*

The manifest number? ☐ Yes ☐ No\*

Waste analysis data, where available? ☐ Yes ☐ No

- (i) Do the generator's records indicate that any soft-hammer wastes are destined for disposed in a landfill or surface impoundment [§268.33(f)]? ☐ Yes ☐ No

N/A

If yes, list facility of destination and waste of concern [§268.8(a)(2)]:

N/A

- (ii) Has the generator submitted demonstrations and certifications for each "soft-hammered" waste destined to be disposed in landfill or surface impoundment to the Regional Administrator prior to the shipment of waste to the TSDF [§268.7(a)(2)]? ☐ Yes ☐ No\*

N/A

- (iii) Has the generator retained a copy of the demonstration on site [§268.8(a)(3)-(a)(4)]? ☐ Yes ☐ No\*

- (iv) Has the generator retained copies of all §268.8 certifications sent to the TSDF [§268.7(a)(6)]? ☐ Yes ☐ No\*

A potential violation is indicated

GEN-8

Handler Name: \_\_\_\_\_  
ID Number: \_\_\_\_\_  
Inspector: \_\_\_\_\_  
Date: \_\_\_\_\_

Comments

(v) Did the generator submit the demonstration to the receiving facility upon the initial shipment of the waste [§268.8(a)(3)-(a)(4)]? ☐ Yes ☒ No\*

(vi) If the Regional Administrator has invalidated the certification, has the generator ceased shipment of the waste and do records indicate that the generator has informed all receiving facilities of the invalidation [§268.8(b)(3)]? ☐ Yes ☒ No\*

N/A

**E. Storage of Prohibited Waste**

1. Were prohibited wastes stored for greater than 90 days? ☐ Yes ☒ No

If yes, was facility operating as a TSD under interim status or final permit [§262.34(b)]? ☐ Yes ☒ No\*

If yes, TSD Checklist must be completed.

**F. Treatment Using RCRA 264/265 Exempt Units or Processes**  
(i.e., boilers, furnaces, distillation units, wastewater treatment tanks, etc.)

1. Were treatment residuals generated from RCRA 264/265 exempt units or processes? ☐ Yes ☒ No

If yes, list type of treatment unit and processes

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, TSD checklist must be completed.

The waste is not a subject to any treatment method after it is generated.

2/ A potential violation is indicated

## RCRA INSPECTION TRACKING

EPA ID number AP091873724 Due for Inspection in Fiscal Quarter 3-89  
 Mandatory (Y/N) Y  
 Name/AKA The Thompsons Corp  
 Contact name/phone ARTHUR M. ALARCA 351-8800  
 Regulatory Status 01 Land Ban (Y/N) Y  
 Date regulatory status changed \_\_\_\_\_  
 Street, City, St. ZIP 36 BUTLER STR, ELIZABETH, N.J. 07207  
 County/Municipal code 20-04  
 VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
 Inspection date 1/27/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_

amended 02/06/89

## AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*						0			Enf. action date: <u>1/27/89</u>
VIOLETION	I						0	<u>2</u>	<u>X</u>	Sched. compliance: <u>1/27/89</u>
	II						0			Actual compliance: _____

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
 SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 01  
 Record review code \_\_\_\_\_  
 Responsible Agency code S  
 Inspector's last name CZACHOR  
 Agency Acronym DHWM Bureau acronym Btco - M  
 Comment \_\_\_\_\_

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
 Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
 Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code 9.3(b) Class (I or II) I  
 Violator Priority (high, med, low) high  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8 Class (I or II) II  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

Violation Code 9.4(g) 8i Class (I or II) II  
 Violator Priority (high, med, low) low  
 Violation Referred to \_\_\_\_\_  
 Referral Date \_\_\_\_\_ Response Date \_\_\_\_\_

9.4(g) 8ii

II

low.

## RCRA INSPECTION TRACKING

EPA ID number NJ096873728 Due for Inspection in Fiscal Quarter 3-89  
Mandatory (Y/N) Y  
Name/AKA THOMAS & BETTS CORP  
Contact name/phone ARTHUR MALANKA (201) 351-8800  
Regulatory Status 01 Land Ban (Y/N) Y  
Date regulatory status changed \_\_\_\_\_  
Street, City, St. ZIP 36 BUTLER ST, ELIZABETH, N.J. 07207  
County/Municipal code 20 04  
VHT Facility number \_\_\_\_\_ File number \_\_\_\_\_ Region code M  
Inspection date 2/15/89 Incident case number \_\_\_\_\_ Quarter \_\_\_\_\_

## AREA OF EVALUATION

		GW	CLO	SSS	PTB	SCH	MNF	LDB	OTH	
CLASS OF	I*									Enf. action date: <u>2/27/89</u>
VIOLATION	I					X				Sched. compliance: <u>2/ /89</u>
	II					X				Actual compliance: <u>none</u>

## AREAS OF EVALUATION

GW = Ground Water CLO = Closure SSS = Financial responsibility PTB = Part B  
SCH = Compliance Schedule MNF = Manifest LDB = Land ban OTH = other

Grant inspection type code 05 Follow-up  
Record review code \_\_\_\_\_  
Responsible Agency code S  
Inspectors last name ETACHER  
Agency Acronym DHWMI Bureau acronym BFC-M  
Comment \_\_\_\_\_

Summons Number \_\_\_\_\_ Date issued \_\_\_\_\_ Badge number \_\_\_\_\_  
Initial Evaluation Date \_\_\_\_\_ Court Date \_\_\_\_\_  
Summons Status code \_\_\_\_\_ Penalty collected \_\_\_\_\_ Date resolved \_\_\_\_\_

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_

Violator Priority (high, med, low) < \_\_\_\_\_ >

Violation Referred to < \_\_\_\_\_ >

Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_

Violator Priority (high, med, low) < \_\_\_\_\_ >

Violation Referred to < \_\_\_\_\_ >

Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

Violation Code < \_\_\_\_\_ > Class (I or II) \_\_\_\_\_

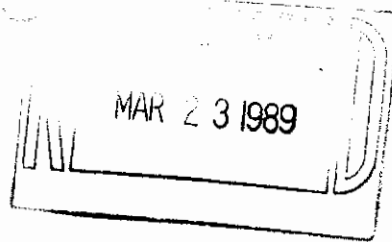
Violator Priority (high, med, low) < \_\_\_\_\_ >

Violation Referred to < \_\_\_\_\_ >

Referral Date < \_\_\_\_\_ > Response Date < \_\_\_\_\_ >

20-04-122

HM-040-89



**State of New Jersey**  
**DEPARTMENT OF ENVIRONMENTAL PROTECTION**  
**DIVISION OF HAZARDOUS WASTE MANAGEMENT**

Michele M. Putnam  
Deputy Director

John J. Trella, Ph.D., Director  
401 East State St.  
CN 028  
Trenton, N.J. 08625-0028  
(609) 633-1408

Lance R. Miller  
Deputy Director

Hazardous Waste Operations

Responsible Party Remedial Action

20 MAR 1989

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Thomas & Betts Company  
36 Butler Street  
Elizabeth, New Jersey 07207

ATTENTION: Arthur Malanga

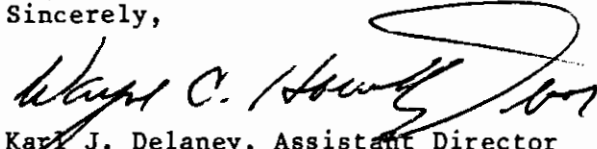
Dear Mr. Malanga:

There is enclosed for service upon you an **ADMINISTRATIVE ORDER AND NOTICE OF CIVIL ADMINISTRATIVE PENALTY ASSESSMENT** issued by the New Jersey Department of Environmental Protection pursuant to the provisions of the Solid Waste Management Act.

The Department is available to meet with the principals of the case to discuss the enclosed enforcement document. Should you desire such a meeting please contact Margaret Elsishans within 20 calendar days of receipt of this letter. This does not affect the time frame within which you may request an administrative hearing, under the Notice of Right to a Hearing provisions of the enclosed document.

Should you have any questions concerning this matter, please contact Margaret Elsishans at (609) 633-0708.

Sincerely,

  
Karl J. Delaney, Assistant Director  
Hazardous Waste Enforcement

KJD/mte  
Enclosure(s)  
cc Health Department  
Mayor's Office  
Bureau of Compliance and Technical Services  
~~Regional Field Office~~



State of New Jersey  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF HAZARDOUS WASTE MANAGEMENT

Michele M. Putnam  
Deputy Director

John J. Trela, Ph.D., Director  
401 East State St.  
CN 028

Lance R. Miller  
Deputy Director

Hazardous Waste Operations

Trenton, N.J. 08625-0028  
(609)633-1408

Responsible Party Remedial Action

20 MAR 1989

IN THE MATTER OF	:	ADMINISTRATIVE ORDER
Thomas & Betts Company	:	AND
36 Butler Street	:	NOTICE OF CIVIL ADMINISTRATIVE
Elizabeth, New Jersey 07207	:	PENALTY ASSESSMENT

This Administrative Order and Notice of Civil Administrative Penalty Assessment is issued pursuant to the authority vested in the Commissioner of the New Jersey Department of Environmental Protection (hereinafter "NJDEP" or the "Department") by N.J.S.A. 13:1D-1 et seq., and the Solid Waste Management Act, N.J.S.A. 13:1E-1 et seq. and duly delegated to the Assistant Director for Enforcement of the Division of Hazardous Waste Management pursuant to N.J.S.A. 13:1B-4.

FINDINGS

1. The Department has determined that Thomas & Betts Company (hereinafter "Thomas & Betts") is a hazardous waste generator (EPA ID# NJD096873724) as defined in N.J.A.C. 7:26-1.4 and is located at Block 2, Lots 02 and 82, 36 Butler Street, Elizabeth City, Union County, State of New Jersey.
2. During the course of an inspection conducted on January 27, 1989, by a Department representative, the following violations were noted:
  - a. Thomas & Betts failed to obtain written approval from the Department prior to the accumulation of hazardous waste in two aboveground tanks for 90 days or less without a permit, in violation of N.J.A.C. 7:26-9.3(b).
  - b. Thomas & Betts failed to hold semi-annual drills involving all employees and appropriate local authorities to test emergency response capabilities at the facility in accordance with the contingency plan and emergency procedures, in violation of N.J.A.C. 7:26-9.4(g)8.
3. Based on the facts set forth in these FINDINGS, the Department has determined that Thomas & Betts has violated the Solid Waste Management Act, N.J.S.A. 13:1E-1 et seq. and the regulations promulgated pursuant thereto, N.J.A.C. 7:26-1 et seq., specifically N.J.A.C. 7:26-9.3(b) and 9.4(g)8.

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED THAT THOMAS & BETTS SHALL:

4. Immediately upon receipt of this Order, cease the accumulation of hazardous waste in the two aboveground tanks and begin storing hazardous waste in accordance with N.J.A.C. 7:26-9.3(a) until written approval is obtained from the Department for aboveground tank storage.
5. Within five (5) days receipt of this Order, make arrangements to conduct semi-annual drills involving all employees and appropriate local authorities to test emergency response capabilities at the facility in accordance with the contingency plan and emergency procedures, in violation of N.J.A.C. 7:26-9.4(g)8.
6. Within twenty (20) calendar days upon receipt of this Order submit the enclosed VERIFICATION OF COMPLIANCE by certified mail, return receipt requested or by hand delivery to:

New Jersey Department of Environmental Protection  
Division of Hazardous Waste Management  
Bureau of Compliance and Technical Services  
CN 028  
Trenton, NJ 08625  
Attention: Margaret Elsishans

THIS ORDER SHALL BE EFFECTIVE UPON RECEIPT.

NOTICE OF CIVIL ADMINISTRATIVE PENALTY ASSESSMENT

7. Pursuant to N.J.S.A. 13:1E-9e and based upon the above FINDINGS, the Department has determined that a civil administrative penalty should be assessed against Thomas & Betts in the amount of \$1,000.00.
8. Payment of the penalty is due when a final order is issued by the Commissioner subsequent to a hearing, if any, or when this Notice of Civil Administrative Penalty assessment becomes a final order (see following paragraph). Payment shall be made by certified check payable to "Treasurer, State of New Jersey" and shall be submitted to:

New Jersey Department of Environmental Protection  
Division of Financial Management Planning and General Services  
Bureau of Revenue  
CN 402  
Trenton, NJ 08625

9. If no request for a hearing is received within twenty (20) calendar days from receipt of this Notice of Civil Administrative Penalty Assessment, it

shall become a final order upon the twenty-first calendar day following its receipt and the penalty shall be due and payable.

NOTICE OF RIGHT TO A HEARING

10. Pursuant to N.J.S.A. 52:14B-1 et seq. and N.J.S.A. 13: 1E-9, Thomas & Betts is entitled to an administrative hearing. Any hearing request shall be delivered to the address below within twenty (20) calendar days from receipt of this Administrative Order and Notice of Civil Administrative Penalty Assessment.

Assistant Director for Enforcement  
Division of Hazardous Waste Management  
401 East State Street  
CN 028  
Trenton, New Jersey 08625  
Attention: Karl J. Delaney, Assistant Director

11. Thomas & Betts shall, in its request for a hearing, furnish NJDEP with the following:
- a. A statement of the legal authority and jurisdiction under which the hearing or action to be taken is to be held;
  - b. A reference to the particular sections of the statute and rules involved;
  - c. A short and plain statement of the matters of fact and law asserted; and
  - d. The provisions of this Administrative Order and Notice of Civil Administrative Penalty Assessment to which Thomas & Betts objects, the reasons for such objections, and any alternative provisions proposed.

GENERAL PROVISIONS

12. This Administrative Order and Notice of Civil Administrative Penalty Assessment is binding on Thomas & Betts its principals, directors, officers, agents, successors, assigns, any trustee in bankruptcy or other trustee, and any receiver appointed to a proceeding in law or equity.
13. Notice is given that violations of any statutes, rules or permits other than those herein cited may be cause for additional enforcement actions, either administrative or judicial. By issuing this Administrative Order and Notice of Civil Administrative Penalty Assessment the Department does not waive its right to initiate additional enforcement actions.
14. No obligations imposed by this Administrative Order and Notice of Civil Administrative Penalty Assessment (with the exception of paragraph seven (7) above) are intended to constitute a debt, damage claim, penalty or

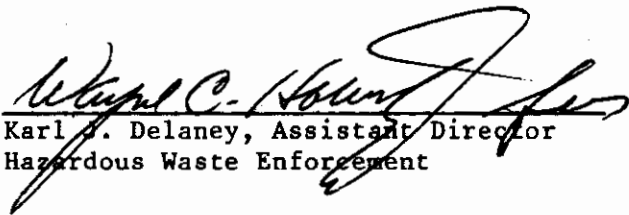


other civil action which should be limited or discharged in a bankruptcy proceeding. All obligations are imposed pursuant to the police powers of the State of New Jersey, intended to protect the public health, safety, welfare, and environment.

15. Notice is given that pursuant to N.J.S.A. 13:1E-9e, the Department is authorized to assess a civil administrative penalty of not more than \$25,000 for each violation and additional penalties of not more than \$2,500 for each day during which the violation continues after receipt of an administrative order from the Department.
16. Notice is further given that pursuant to N.J.S.A. 13:1E-9f, any person who violates N.J.S.A. 13:1E-1 et seq. or any code, rule, or regulation promulgated thereunder shall be liable to a penalty of not more than \$50,000 per day of such violation, and each day's continuance of the violation shall constitute a separate violation.
17. Notice is further given that pursuant to N.J.S.A. 13:1E-9f, any person who violates an administrative order issued pursuant to N.J.S.A. 13:1E-9c, or a court order issued pursuant to N.J.S.A. 13:1E-9d, or who fails to pay a civil administrative penalty in full after it is due shall be subject upon order of a court to a civil penalty not to exceed \$100,000 per day of such violation and each day's continuance of the violation shall constitute a separate violation.

DEPARTMENT OF ENVIRONMENTAL PROTECTION

BY:

  
Karl J. Delaney, Assistant Director  
Hazardous Waste Enforcement

KJD/mte